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LEGISLATIVE HISTORY

Public Law 410--78th Congress

Chapter 373--2d Session

v. R. 4624

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## DIGEST OF PUBLIC LAW 410

PUBLIC HEALTH SERVICE ACT. Consolidated and revises the laws relating to the Public Health Service, and for other purposes.

### INDEX AND SUMMARY OF HISTORY OF H. R. 4624

|                 |                                                                                                                                                                      |
|-----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| October 4, 1943 | H. R. 3379 introduced by Rep. Bulwinkle and was referred to the House Committee on Interstate and Foreign Commerce. Print of the bill as introduced. (Similar bill). |
| March 1, 1944   | Hearings: House, H. R. 3379.                                                                                                                                         |
| April 18, 1944  | H. R. 4624 introduced by Rep. Bulwinkle and was referred to the House Committee on Interstate and Foreign Commerce. Print of the bill as introduced.                 |
| April 20, 1944  | House Committee reported H. R. 4624 without amendment. House Report 1364. Print of the bill as reported.                                                             |
| May 22, 1944    | H. R. 4624 debated in the House and passed as reported.                                                                                                              |
| May 23, 1944    | H. R. 4624 was referred to the Senate Committee on Commerce. Print of the bill as referred.                                                                          |
| June 16, 1944   | The Senate Committee on Commerce was discharged, and the bill was referred to the Senate Committee on Education and Labor.                                           |
| June 19, 1944   | Hearings: Senate, H. R. 4624.                                                                                                                                        |
| June 21, 1944   | Senate Committee reported H. R. 4624 with amendments. Senate Report 1027. Print of the bill as reported.                                                             |
| June 22, 1944   | H. R. 4624 debated in the Senate and passed as reported.                                                                                                             |
| June 23, 1944   | House agreed to the Senate amendments. (Pages of the Congressional Record not available.)                                                                            |
| July 1, 1944    | Approved. Public Law 410.                                                                                                                                            |







78TH CONGRESS  
1ST SESSION

# H. R. 3379

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## IN THE HOUSE OF REPRESENTATIVES

OCTOBER 4, 1943

Mr. BULWINKLE introduced the following bill; which was referred to the Committee on Interstate and Foreign Commerce

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## A BILL

To codify the laws relating to the Public Health Service, and  
for other purposes.

1      *Be it enacted by the Senate and House of Representa-*  
2      *tives of the United States of America in Congress assembled,*

### 3      TITLE I—SHORT TITLE AND DEFINITIONS

#### 4                                      SHORT TITLE

5      SECTION 1. Titles I to V, inclusive, of this Act may be  
6      cited as the "Public Health Service Code".

#### 7                                      DEFINITIONS

8      SEC. 2. When used in this Act—

9      (a) The term "Service" means the Public Health  
10      Service;

1       (b) The term "Surgeon General" means the Surgeon  
2 General of the Public Health Service;

3       (c) The term "Administrator" means the Federal Se-  
4 curity Administrator;

5       (d) The term "regulations", except when otherwise  
6 specified, means rules and regulations made by the Surgeon  
7 General with the approval of the Administrator;

8       (e) The term "executive department" means any execu-  
9 tive department, agency, or independent establishment of  
10 the United States or any corporation wholly owned by the  
11 United States;

12       (f) The term "State" means a State or the District of  
13 Columbia, Hawaii, Alaska, Puerto Rico, or the Virgin  
14 Islands, except that as used in section 361 (d) such term  
15 means a State, the District of Columbia, or Alaska;

16       (g) The term "possession" shall include, among other  
17 possessions, Puerto Rico and the Virgin Islands;

18       (h) The term "seamen" includes any person employed  
19 on board primarily in the care, preservation, or navigation  
20 of any vessel, or in the service, on board, of those engaged  
21 in such care, preservation, or navigation;

22       (i) The term "vessel" includes every description of  
23 watercraft or other artificial contrivance used, or capable of  
24 being used, as a means of transportation on water, exclusive  
25 of aircraft and amphibious contrivances;



1       (j) The term “habit-forming narcotic drug” or “nar-  
2   cotic” means opium and coca leaves and the several alkaloids  
3   derived therefrom, the best known of these alkaloids being  
4   morphia, heroin, and codeine, obtained from opium, and  
5   cocaine derived from the coca plant; all compounds, salts,  
6   preparations, or other derivatives obtained either from the  
7   raw material or from the various alkaloids; Indian hemp and  
8   its various derivatives, compounds, and preparations, and  
9   peyote in its various forms; and

10       (k) The term “addict” means any person who habitu-  
11   ally uses any habit-forming narcotic drug so as to endanger  
12   the public morals, health, safety, or welfare, or who is or  
13   has been so far addicted to the use of such habit-forming  
14   narcotic drugs as to have lost the power of self-control with  
15   reference to his addiction.

## 16                   TITLE II—ADMINISTRATION

### 17                   PUBLIC HEALTH SERVICE

18       SEC. 201. The Public Health Service in the Federal  
19   Security Agency shall be administered by the Surgeon Gen-  
20   eral under the supervision and direction of the Administrator.

### 21                   ORGANIZATION

22       SEC. 202. The Service shall consist of (1) the Office of  
23   the Surgeon General, (2) the National Institute of Health,  
24   (3) the Bureau of Medical Services, and (4) the Bureau of  
25   State Services. The Surgeon General is authorized and di-

1 rected to assign to the Office of the Surgeon General, to  
2 the National Institute of Health, to the Bureau of Medical  
3 Services, and to the Bureau of State Services, respectively,  
4 the several functions of the Service, and to establish within  
5 them such divisions, sections, and other units as he may find  
6 necessary; and from time to time abolish, transfer, and con-  
7 solidate divisions, sections, and other units and assign their  
8 functions and personnel in such manner as he may find  
9 necessary for efficient operation of the Service. The Sur-  
10 geon General may delegate to any officer or employee of the  
11 Service such of his powers and duties, hereinafter in this  
12 Act prescribed, except the making of regulations, as he may  
13 deem necessary or expedient.

#### 14 COMMISSIONED CORPS

15 SEC. 203. The commissioned corps in the Service shall  
16 consist of commissioned officers of the Regular Corps and  
17 commissioned officers of the Reserve Corps. All such officers  
18 shall be citizens and shall be appointed without regard to the  
19 civil-service laws and compensated without regard to the  
20 Classification Act of 1923, as amended. Commissioned  
21 officers of the Reserve Corps shall be appointed by the  
22 President and commissioned officers of the Regular Corps  
23 shall be appointed by him by and with the advice and consent  
24 of the Senate. Commissioned officers of the Reserve Corps  
25 shall at all times be subject to call to active duty by the

1 Surgeon General, including active duty for the purpose of  
2 training and active duty for the purpose of determining their  
3 fitness for appointment in the Regular Corps. All active  
4 service in the Reserve Corps, as well as service in the  
5 Regular Corps, shall be credited for the purpose of promotion  
6 in the Regular Corps.

7 SURGEON GENERAL

8 SEC. 204. The Surgeon General shall be appointed  
9 from the Regular Corps for a four-year term by the Presi-  
10 dent by and with the advice and consent of the Senate.  
11 Upon the expiration of such term the Surgeon General,  
12 unless reappointed, shall revert to the grade and number in  
13 the Regular Corps that he would have occupied had he not  
14 served as Surgeon General.

15 DEPUTY SURGEON GENERAL AND ASSISTANT SURGEONS

16 GENERAL

17 SEC. 205. (a) The Surgeon General shall assign one  
18 commissioned officer from the Regular Corps to administer  
19 the Office of the Surgeon General, to act as Surgeon General  
20 during the absence or disability of the Surgeon General or  
21 in the event of a vacancy in that office, and to perform such  
22 other duties as the Surgeon General may prescribe, and while  
23 so assigned he shall have the title of Deputy Surgeon General.

24 (b) The Surgeon General shall assign six commissioned  
25 officers from the Regular Corps to be, respectively, the

1 Director of the National Institute of Health, the Chief of the  
2 Bureau of State Services, the Chief of the Bureau of Medical  
3 Services, the Chief Medical Officer of the United States  
4 Coast Guard, the Chief Dental Officer of the Service, and  
5 the Chief Sanitary Engineering Officer of the Service, and  
6 while so serving they shall each have the title of Assistant  
7 Surgeon General.

8 (c) The Surgeon General shall designate the Assistant  
9 Surgeon General who shall serve as Surgeon General in case  
10 of absence or disability, or vacancy in the offices, of both the  
11 Surgeon General and the Deputy Surgeon General.

12 GRADES, RANKS, AND TITLES OF THE COMMISSIONED CORPS

13 SEC. 206. (a) The Surgeon General during the period  
14 of his appointment as such, shall be of the same grade, with  
15 the same pay and allowances, as the Surgeon General of the  
16 Regular Army of the United States; and the Deputy Surgeon  
17 General and Assistant Surgeons General, while assigned as  
18 such, shall have the grade corresponding with the grade of  
19 Brigadier General, with the same pay and allowances. The  
20 grades of commissioned officers of the Service shall corre-  
21 spond with grades of officers of the Regular Army of the  
22 United States as follows:

- 23 (1) Officers of the director grade—colonel;  
24 (2) Officers of the senior grade—lieutenant colonel;  
25 (3) Officers of the full grade—major;



1 (4) Officers of the passed assistant grade—captain;

2 (5) Officers of the assistant grade—first lieutenant;

3 and

4 (6) Officers of the junior assistant grade—second  
5 lieutenant.

6 (b) The titles of medical officers of the foregoing grades  
7 shall be respectively (1) medical director, (2) senior sur-  
8 geon, (3) surgeon, (4) passed assistant surgeon, (5)  
9 assistant surgeon, and (6) junior assistant surgeon. The  
10 President is authorized to prescribe titles, appropriate to the  
11 several grades, for commissioned officers of the Service other  
12 than medical officers. All titles of the officers of the Reserve  
13 Corps shall have the suffix “Reserve”.

#### 14 SPECIAL TEMPORARY POSITIONS

15 SEC. 207. (a) When necessary for the accomplishment  
16 of important temporary work, the President may establish  
17 special temporary positions in the Service and prescribe  
18 grades which shall be applicable to officers during periods  
19 they are assigned to such positions. While assigned to any  
20 such position an officer shall receive the pay and allowances  
21 applicable to the grade so prescribed. Not more than three  
22 such positions existing at any one time shall have the grade  
23 of Assistant Surgeon General. The Surgeon General shall  
24 assign commissioned officers to such positions.

25 (b) Commissioned officers and qualified technical or

1 professional noncommissioned personnel may be assigned by  
2 the Surgeon General to be chiefs of administrative units.  
3 Such assignments shall not affect the pay of commissioned  
4 officers so assigned, except that when any commissioned  
5 officer below the grade of director is assigned to serve as  
6 chief of a division such officer during the period so assigned  
7 shall have the temporary grade and receive the pay and  
8 allowances applicable to the director grade.

9 APPOINTMENT OF PERSONNEL

10 SEC. 208. (a) (1) Except as provided in subsection  
11 (b) of this section, original appointments to the Regular  
12 Corps may be made only in the junior assistant, assistant,  
13 and passed assistant grades and original appointments to a  
14 grade above junior assistant shall be made only after passage  
15 of an examination (given in accordance with regulations of  
16 the President) in one or more of the several branches of  
17 medicine, surgery, dentistry, hygiene, sanitary engineering,  
18 pharmacy, or other specialties related to public health.

19 (2) Original appointments to the Reserve Corps may  
20 be made to any grade up to and including the director grade  
21 but only after passage of an examination (as prescribed by  
22 regulations). Reserve commissions shall be for a period  
23 of not more than five years and any such commission may  
24 be terminated by the President at any time, in his discretion.

1       (b) Whenever commissioned officers of the Service are  
2 not available for the performance of duties requiring highly  
3 specialized training and experience, the Administrator on  
4 recommendation of the Surgeon General shall report that  
5 fact to the President and the President is authorized to  
6 appoint, by and with the advice and consent of the Senate,  
7 not to exceed three persons in any one fiscal year to grades  
8 in the Regular Corps of the Service above that of passed  
9 assistant, but not to a grade above that of director; and for  
10 purposes of pay and pay period any person appointed under  
11 the provisions of this section shall be considered as having  
12 had on the date of appointment service equal to that of the  
13 junior officer of the grade to which appointed.

14       (c) Pursuant to regulations, special consultants may be  
15 employed to assist and advise in the operation of the Service.  
16 Such consultants may be appointed without regard to the  
17 civil-service laws and their compensation may be fixed with-  
18 out regard to the Classification Act of 1923, as amended.

19       (d) Pursuant to regulations individual scientists, other  
20 than commissioned officers of the Service, may be designated  
21 by the Surgeon General to receive fellowships, appointed for  
22 duty with the Service without regard to the civil-service laws  
23 and compensated without regard to the Classification Act of  
24 1923, as amended, may hold their fellowships under condi-

1 tions prescribed therein, and may be assigned for studies or  
2 investigations either in this country or abroad during the  
3 terms of their fellowships.

4 (e) The appointment of any officer or employee of the  
5 Service made in accordance with the civil-service laws may  
6 be made effective as of the date on which such officer or  
7 employee enters upon duty.

8 PAY AND ALLOWANCES

9 SEC. 209. (a) Commissioned officers of the Regular  
10 Corps shall receive such pay and allowances as are or may  
11 hereafter be provided by law.

12 (b) Reserve officers shall receive the same pay and  
13 allowances when on active duty as commissioned officers of  
14 the Regular Corps, including allowances for travel and trans-  
15 portation of household goods and effects.

16 (c) In accordance with regulations commissioned officers  
17 of the Regular Corps and officers of the Reserve on active  
18 duty may make allotments from their pay and may be granted  
19 leaves of absence without any deduction from their pay. Such  
20 officers shall also be permitted to purchase quartermaster  
21 supplies from the Army, Navy, and Marine Corps at the  
22 same price as is charged officers of the Army, Navy, and  
23 Marine Corps.

24 (d) Female commissioned officers of the Service shall  
25 receive the same pay and allowances as male officers of



1 corresponding grades, including allowances for dependents,  
2 except that no allowance shall be paid to any female com-  
3 missioned officer on account of any dependent who is not in  
4 fact dependent upon such officer for his or her chief sup-  
5 port. For the purposes of this subsection the term "depend-  
6 ent" shall include a husband, father, mother, and unmarried  
7 children (including stepchildren and adopted children)  
8 under twenty-one years of age.

9 (e) Members of the National Advisory Health Council  
10 and members of the National Advisory Cancer Council, other  
11 than ex officio members, while attending conferences or  
12 meetings of their respective Councils or while otherwise serv-  
13 ing at the request of the Surgeon General, shall be entitled  
14 to receive compensation at a rate to be fixed by the Adminis-  
15 trator, but not exceeding \$25 per diem, together with an  
16 allowance for actual and necessary traveling and subsistence  
17 expenses while so serving away from their places of residence.

18 (f) Field employees of the Service, except those em-  
19 ployed on a per diem or fee basis, who render part-time duty  
20 and are also subject to call at any time for services not  
21 contemplated in their regular part-time employment,  
22 may be paid annual compensation for such part-time duty  
23 and, in addition, such fees for such other services as the  
24 Surgeon General may determine; but in no case shall the  
25 total paid to any such employee for any fiscal year exceed

1 the amount of the minimum annual salary rate of the classifi-  
2 cation grade of the employee.

3 (g) Whenever any commissioned or other officer or  
4 employee of the Service is assigned for duty which the  
5 Surgeon General finds requires intimate contact with persons  
6 afflicted with leprosy, he may receive, as provided by regula-  
7 tions of the President, in addition to the pay and any allow-  
8 ance, if any, of his grade, not more than one-half the pay  
9 of such grade, and allowances or increased allowances.

10 (h) Individuals appointed under section 208 (d) shall  
11 have included in their fellowships such stipends or allowances  
12 (including travel and subsistence expenses) as the Surgeon  
13 General may deem necessary to procure qualified fellows.

14 PROMOTIONS AND SEPARATION OF COMMISSIONED OFFICERS  
15 IN THE REGULAR CORPS

16 SEC. 210. (a) Promotions of commissioned officers of the  
17 Regular Corps to any grade up to and including the director  
18 grade shall be made only after examination given in accord-  
19 ance with regulations of the President and shall be made  
20 according to the same length of service as is now or may  
21 hereafter be prescribed for promotion of officers of correspond-  
22 ing grades of the Medical Corps of the Army, except that—

23 (1) In time of war or national emergency pro-  
24 claimed by the President, any commissioned officer of the  
25 Regular Corps may be appointed to a higher temporary

1 grade with the pay and allowances thereof without  
2 examination and without vacating his permanent  
3 appointment;

4 (2) For purposes of promotion, an officer whose  
5 initial appointment to the Regular Corps was above  
6 the assistant grade shall be considered as having had on  
7 the date of such initial appointment service equal to  
8 that of the junior officer of the grade to which he was  
9 appointed, except that if his active commissioned service  
10 in the Service exceeds that of the junior officer of the  
11 grade, such service (not exceeding ten years for an  
12 officer appointed in the passed assistant grade and four-  
13 teen years for an officer appointed in the full grade)  
14 shall be credited for purposes of promotion; and

15 (3) Officers commissioned in the grade of junior  
16 assistant shall be examined for promotion after not more  
17 than two years of service and if qualified shall be pro-  
18 moted to the next higher grade.

19 (b) At the end of his first three years of service, the  
20 record of each commissioned officer in the Regular Corps  
21 initially appointed in or above the grade of passed assistant  
22 shall be reviewed in accordance with regulations of the  
23 President and if found not fully qualified for further service  
24 he shall be separated from the Service and paid six months'  
25 pay and allowances.

1       (c) When a commissioned officer in the Regular Corps  
2 is found, after examination, to be not qualified for promo-  
3 tion for reasons other than physical disability incurred in  
4 line of duty—

5           (1) If below the full grade he shall be separated  
6 from the Service, and if in the assistant grade he shall  
7 be separated and paid six months' pay and allowances,  
8 and if in the passed assistant grade he shall be separated  
9 and paid one year's pay and allowances; and

10          (2) If in the full or senior grade he shall be reported  
11 as not in line of promotion, or shall be retired and paid  
12 at the rate of  $2\frac{1}{2}$  per centum for each complete year of  
13 active commissioned service in the Service, but in no  
14 case to exceed 60 per centum of his active pay at the  
15 time he is retired.

16       PROMOTIONS OF OFFICERS OF THE RESERVE CORPS

17       SEC. 211. Officers of the Reserve Corps shall be pro-  
18 moted as provided in regulations prescribed by the President  
19 and shall be eligible for appointment to higher temporary  
20 grades in time of war or national emergency proclaimed by  
21 the President.

22       RETIREMENT OF COMMISSIONED OFFICERS

23       SEC. 212. (a) Commissioned officers retired for disability  
24 incurred in line of duty shall be entitled to receive 75 per  
25 centum of their active pay at the time of retirement, except



1 that any officer so retired who at the time of his initial  
2 appointment was more than forty-five years of age and any  
3 officer of the Reserve Corps shall be entitled to receive pay  
4 only at the rate of 4 per centum of active pay at the time  
5 of retirement for each twelve months of active commissioned  
6 service in the Army, Navy, Coast Guard, or Public Health  
7 Service, the total to be not more than 75 per centum of  
8 such pay.

9 (b) A commissioned officer of the Public Health Service  
10 on active duty shall be retired on the 1st day of the month  
11 immediately following his sixty-fourth birthday. Any such  
12 officer, if he (1) is a member of the regular corps, or  
13 (2) has had a total of twenty years' active commissioned  
14 service, including any commissioned service in the Army,  
15 Navy, or Coast Guard, shall be retired at the same rate  
16 of pay he would have received under subsection (a) if on  
17 the same date he had been retired because of disability  
18 incurred in line of duty.

19 SIX MONTHS' PAY ON DEATH

20 SEC. 213. Upon official notification of the death oc-  
21 curring after December 6, 1941, from injury or disease, not  
22 the result of his or her own misconduct, of any commissioned  
23 officer of the Service on active duty, the Surgeon General  
24 shall cause to be paid from funds available for the pay of  
25 commissioned officers of the Service to the surviving spouse,

1 or if there be none to the child or children (as defined by  
2 regulations), an amount equal to six months' pay at the  
3 rate received by such officer at the time of his or her death.  
4 If there be none of the foregoing relatives, the Surgeon  
5 General shall cause such amount to be paid to any other  
6 dependent relative of such commissioned officer, previously  
7 designated by such officer in accordance with regulations,  
8 or, in the absence of such designation, to any one or more of  
9 the grandparents, parents, sisters, and brothers determined  
10 by the Surgeon General to have been dependent upon such  
11 officer prior to his or her death, and such determination shall  
12 be final and conclusive upon the accounting officers of the  
13 Government. Payments under this section shall be in addi-  
14 tion to all other benefits otherwise provided by law and the  
15 provisions of section 7 of the Act of September 7, 1916, as  
16 amended (U. S. C., title 5, sec. 757) shall not be applicable  
17 to such payments.

### DETAIL OF PERSONNEL

19 SEC. 214. (a) The Administrator is authorized, upon  
20 the request of the head of an executive department, to  
21 detail officers or employees of the Service to such department  
22 for duty as agreed upon by the Administrator and the head  
23 of such department in order to cooperate in, or conduct  
24 work related to, the functions of such department or of the



1 Service. When officers or employees are so detailed their  
2 salaries and allowances may be paid from working funds  
3 established as provided by law or may be paid by the Service  
4 from applicable appropriations and reimbursement may be  
5 made as agreed upon by the Administrator and the head of  
6 the executive department concerned.

7 (b) Upon the request of any State, or political subdi-  
8 vision thereof, personnel of the Service may be detailed by  
9 the Surgeon General for the purpose of assisting such State  
10 or political subdivision in work related to the functions of the  
11 Service.

12 (c) The Surgeon General may detail personnel of the  
13 Service to nonprofit educational, research, or other institu-  
14 tions engaged in health activities for special studies of scien-  
15 tific problems and for instruction of students and the dissemi-  
16 nation of information relating to public health.

17 (d) Personnel detailed under subsections (b) and (c)  
18 shall be paid from applicable appropriations of the Service,  
19 except that, in accordance with regulations such personnel  
20 may be placed on leave without pay and paid by the State,  
21 subdivision, or institution to which they are detailed; but in  
22 any case their services while so detailed shall be considered  
23 as having been performed in the Service for purposes of  
24 longevity pay and promotion.

1

## REGULATIONS

2

SEC. 215. (a) The President shall from time to time  
3 prescribe regulations with respect to the appointment, pro-  
4 motion, retirement, termination of commission, titles, pay,  
5 uniforms, allowances (including allowances for uniforms and  
6 increased allowances for foreign service), and discipline of  
7 the commissioned corps of the Service.

8

(b) The Surgeon General, with the approval of the  
9 Administrator, unless specifically otherwise provided, shall  
10 promulgate all other regulations necessary to the administra-  
11 tion of the Service, including regulations with respect to  
12 travel, transportation of household goods and effects, allot-  
13 ments from their pay by commissioned officers, and uniforms  
14 for employees.

15

(c) No regulation relating to qualifications for appoint-  
16 ment of medical officers or employees shall give preference to  
17 any school of medicine.

18

## USE OF SERVICE IN EMERGENCY

19

SEC. 216. In time of actual war or emergency pro-  
20 claimed by the President, he may utilize the Service to  
21 such extent and in such manner as shall in his judgment  
22 promote the public interest, and he may by Executive order  
23 declare the commissioned corps of the Service to be a mili-  
24 tary service. Upon such declaration, and during the period  
25 of such war or emergency or such part thereof as the Presi-

1 dent shall prescribe, the commissioned corps (1) shall con-  
2 stitute a branch of the land and naval forces of the United  
3 States (and service in such corps during such period or part  
4 thereof shall be active military service), and (2) to the  
5 extent prescribed by regulations of the President, shall be  
6 subject to the Articles of War and to the Articles for the  
7 Government of the Navy: *Provided*, That during such period  
8 or part thereof the commissioned corps shall continue to  
9 operate as part of the Service except to the extent that the  
10 President may direct as Commander in Chief.

11 NATIONAL ADVISORY HEALTH AND CANCER COUNCILS

12 SEC. 217. (a) The National Advisory Health Council  
13 shall consist of fourteen members. The Director of the Na-  
14 tional Institute of Health, and three experts, one each from  
15 the Army, the Navy, and the Bureau of Animal Industry, to  
16 be detailed by the Secretary of War, the Secretary of the  
17 Navy, and the Secretary of Agriculture, respectively, shall be  
18 ex officio members of the Council. The Surgeon General,  
19 with the approval of the Administrator, shall appoint, without  
20 regard to the civil-service laws, ten members of the Coun-  
21 cil who shall be persons, not otherwise in the employ of  
22 the United States, skilled in the sciences related to health.  
23 Each appointed member shall hold office for a term of  
24 five years, except that any member appointed to fill a  
25 vacancy occurring prior to the expiration of the term for

1 which his predecessor was appointed shall be appointed for  
2 the remainder of such term. An appointed member shall not  
3 be eligible to serve continuously for more than five years  
4 but shall be eligible for reappointment if he has not served  
5 immediately preceding his reappointment.

6 (b) The National Advisory Health Council shall advise,  
7 consult with, and make recommendations to, the Surgeon  
8 General on matters relating to health activities and functions  
9 of the Service, The Surgeon General is authorized to utilize  
10 the services of any member or members of the Council, and  
11 where appropriate, any member or members of the National  
12 Advisory Cancer Council in connection with matters related  
13 to the work of the Service, for such periods, in addition to  
14 conference periods, as he may determine.

15 (c) The National Advisory Cancer Council shall consist  
16 of the Surgeon General ex officio, who shall be Chairman, and  
17 of six members to be appointed without regard to the civil-  
18 service laws by the Surgeon General with the approval of the  
19 Administrator. The six appointed members shall be selected  
20 from leading medical or scientific authorities who are out-  
21 standing in the study, diagnosis, or treatment of cancer. Each  
22 appointed member shall hold office for a term of three years,  
23 except that any member appointed to fill a vacancy occurring  
24 prior to the expiration of the term for which his predecessor  
25 was appointed shall be appointed for the remainder of such



1 term. An appointed member shall not be eligible to serve  
2 continuously for more than three years but shall be eligible  
3 for reappointment if he has not served immediately preceding  
4 his reappointment.

5 TITLE III—GENERAL POWERS AND DUTIES OF  
6 PUBLIC HEALTH SERVICE

7 PART A—RESEARCH AND INVESTIGATIONS

8 IN GENERAL

9 SEC. 301. The Surgeon General shall conduct in the  
10 Service, and encourage, cooperate with, and render assistance  
11 to other appropriate public authorities, scientific institutions,  
12 and scientists in the conduct of, and promote the coordination  
13 of, research, investigations, experiments, demonstrations, and  
14 studies relating to the causes, diagnosis, treatment, control,  
15 and prevention of physical and mental diseases, defects and  
16 injuries of man, including environmental sanitation, indus-  
17 trial hygiene, water purification, sewage treatment, and pol-  
18 lution of lakes and streams. In carrying out the foregoing  
19 the Surgeon General is authorized to—

20 (a) Collect and make available through publications  
21 and other appropriate means, information as to, and the  
22 practical application of, such research and other activities;

23 (b) Make available facilities of the Service to  
24 appropriate public authorities, and to health officials and  
25 scientists engaged in special study;



1           (c) Establish and maintain research fellowships in  
2     the Service with such stipends and allowances (including  
3     traveling and subsistence expenses) as he may deem  
4     necessary to procure the assistance of the most brilliant  
5     and promising research fellows from the United States  
6     and abroad;

7           (d) Make grants in aid to universities, hospitals,  
8     laboratories, and other public or private institutions, and  
9     to individuals for such research projects as are recom-  
10    mended by the National Advisory Health Council (or,  
11    with respect to cancer, recommended by the National  
12    Advisory Cancer Council) ;

13          (e) Secure from time to time and for such periods  
14    as he deems advisable, the assistance and advice of  
15    experts, scholars, and consultants from the United States  
16    or abroad;

17          (f) Admit and treat persons at institutions, hos-  
18    pitals, and stations of the Service; and

19          (g) Adopt, upon recommendation of the National  
20    Advisory Health Council (or, with respect to cancer,  
21    upon recommendation of the National Advisory Cancer  
22    Council), such additional means as he deems necessary  
23    or appropriate to carry out the purposes of this section.

24

## NARCOTICS

25

SEC. 302. (a) In carrying out the purposes of section

1 301 with respect to narcotics, the studies and investigations  
2 shall include the use and misuse of narcotics drugs, the  
3 quantities of crude opium, coca leaves, and their salts, de-  
4 rivatives, and preparations, together with reserves thereof,  
5 necessary to supply the normal and emergency medicinal  
6 and scientific requirements of the United States. The results  
7 of studies and investigations of the quantities of crude opium,  
8 coca leaves, or other narcotic drugs, together with such re-  
9 serves thereof, as are necessary to supply the normal and  
10 emergency medicinal and scientific requirements of the  
11 United States, shall be reported not later than the 1st day  
12 of September each year to the Commissioner of Narcotics,  
13 to be used at his discretion in determining the amounts of  
14 crude opium and coca leaves to be imported under the Nar-  
15 cotic Drugs Import and Export Act, as amended.

16 (b) The Surgeon General shall cooperate with States  
17 for the purpose of aiding them to solve their narcotic drug  
18 problems and shall give authorized representatives of the  
19 States the benefit of his experience in the care, treatment, and  
20 rehabilitation of narcotic addicts to the end that each State  
21 may be encouraged to provide adequate facilities and methods  
22 for the care and treatment of its narcotic addicts.

23 PART B—FEDERAL-STATE COOPERATION

24 IN GENERAL

25 SEC. 311. The Surgeon General is authorized to accept

1 from State and local authorities any assistance in the enforce-  
2 ment of quarantine regulations made pursuant to this Act  
3 which such authorities may be able and willing to provide.  
4 The Surgeon General shall also assist States and their political  
5 subdivisions in the prevention and suppression of communi-  
6 cable diseases, shall cooperate with and aid State and local  
7 authorities in the enforcement of their quarantine and other  
8 health regulations and in carrying out the purposes specified  
9 in section 314, and shall advise the several States on matters  
10 relating to the preservation and improvement of the public  
11 health.

12 HEALTH CONFERENCES

13 SEC. 312. A conference of the health authorities of the  
14 several States shall be called annually by the Surgeon Gen-  
15 eral. Whenever in his opinion the interests of the public  
16 health would be promoted by a conference, the Surgeon  
17 General may invite as many of such health authorities to con-  
18 fer as he deems necessary or proper. Upon the application  
19 of health authorities of five or more States it shall be the duty  
20 of the Surgeon General to call a conference of all State and  
21 Territorial health authorities joining in the request. Each  
22 State represented at any conference shall be entitled to a  
23 single vote.

24 COLLECTION OF VITAL STATISTICS

25 SEC. 313. To secure uniformity in the registration of

1 mortality, morbidity, and vital statistics the Surgeon General  
2 shall prepare and distribute suitable and necessary forms for  
3 the collection and compilation of such statistics which shall  
4 be published as a part of the health reports published by the  
5 Surgeon General.

6 GRANTS AND SERVICES TO STATES

7 SEC. 314. (a) To enable the Surgeon General to carry  
8 out the purposes of section 301 with respect to developing  
9 more effective measures for the prevention, treatment, and  
10 control of venereal diseases, and to assist, through grants and  
11 as otherwise provided in this section, States, counties, health  
12 districts, and other political subdivisions of the States in  
13 establishing and maintaining adequate measures for the pre-  
14 vention, treatment, and control of such diseases, including the  
15 training of personnel for State and local health work, and to  
16 enable him to (1) prevent and control the spread of the  
17 venereal diseases in interstate traffic; (2) conduct health and  
18 sanitation activities to prevent the spread of venereal diseases  
19 in (A) areas adjoining military and naval reservations, (B)  
20 areas where there are concentrations of military and naval  
21 forces, and (C) areas adjoining Government and private  
22 industrial plants engaged in defense work; and (3) meet the  
23 cost of pay, allowances, and traveling expenses of commis-  
24 sioned officers and other personnel of the Service detailed to



1 assist in carrying out the purposes of this section with respect  
2 to the venereal diseases, and for the administration of this  
3 section with respect to such diseases, there is hereby author-  
4 ized to be appropriated for each fiscal year a sum sufficient  
5 to carry out the purposes of this subsection.

6 (b) To enable the Surgeon General to assist, through  
7 grants and as otherwise provided in this section, States,  
8 counties, health districts, and other political subdivisions of  
9 the States in establishing and maintaining adequate public  
10 health services, including demonstrations and including the  
11 training of personnel for State and local health work, and to  
12 enable him to (1) prevent and control the spread of com-  
13 municable diseases in interstate traffic; (2) conduct health  
14 and sanitation activities in (A) areas adjoining military and  
15 naval reservations, (B) areas where there are concentrations  
16 of military and naval forces; (C) areas adjoining Govern-  
17 ment and private industrial plants engaged in defense work,  
18 and (D) Government and private industrial plants engaged  
19 in defense work; and (3) meet the cost of pay, allowances,  
20 and traveling expenses of commissioned officers and other  
21 personnel of the Service detailed to assist States in carrying  
22 out the purposes of this section, and for the administration  
23 of this section, there is hereby authorized to be appropriated  
24 for each fiscal year a sum sufficient to carry out the purposes  
25 of this subsection.



1       (c) For each fiscal year, the Surgeon General, with the  
2 approval of the Administrator, shall determine the total sum  
3 from the appropriation under subsection (a) and the total  
4 sum from the appropriation under subsection (b) which  
5 shall be available for allotment among the several States.  
6 He shall, in accordance with regulations, from time to time  
7 make allotments from such sums to the several States on  
8 the basis of (1) the population, (2) the size of the venereal-  
9 disease problem and the size of other special health problems,  
10 respectively, and (3) the financial need of the respective  
11 States. Upon making such allotments the Surgeon General  
12 shall notify the Secretary of the Treasury of the amounts  
13 thereof.

14       (d) The Surgeon General, with the approval of the  
15 Administrator, shall from time to time determine the amounts  
16 to be paid to each State from the allotments to such State,  
17 and shall certify to the Secretary of the Treasury, the amounts  
18 so determined, reduced or increased, as the case may be, by  
19 the amounts by which he finds, that estimates of required  
20 expenditures with respect to any prior period were greater  
21 or less than the actual expenditures for such period. Upon  
22 receipt of such certification, the Secretary of the Treasury  
23 shall, through the Division of Disbursement of the Treasury  
24 Department and prior to audit or settlement by the General  
25 Accounting Office, pay in accordance with such certification.

1       (e) The moneys so paid to any State shall be expended  
2 solely in carrying out the purposes specified in subsection  
3 (a) or subsection (b) of this section, as the case may be,  
4 and in accordance with plans presented by the health author-  
5 ity of such State and approved by the Surgeon General.

6       (f) Money so paid shall be paid upon the condition  
7 that there shall be spent in such State for the same general  
8 purpose from funds of such State and its political subdivi-  
9 sions an amount determined in accordance with regulations.

10       (g) Whenever the Surgeon General, after reasonable  
11 notice and opportunity for hearing to the health authority  
12 of the State, finds that, with respect to money paid to the  
13 State out of appropriation under subsection (a) or subsec-  
14 tion (b), as the case may be, there is a failure to comply  
15 substantially with either—

16               (1) the provisions of this section;

17               (2) the plan submitted under subsection (e) ; or

18               (3) the regulations;

19 the Surgeon General shall notify such State health authority  
20 either that further payments will not be made to the State  
21 from appropriations under such subsection (or in his dis-  
22 cretion that further payments will not be made to the State  
23 from such appropriations for activities in which there is such  
24 failure) , until he is satisfied that there will no longer be any

1 such failure. Until he is so satisfied the Surgeon General  
2 shall make no further certification for payment to such State  
3 (or limit payment to activities in which there is no such  
4 failure), from appropriations under such subsection.

5 (h) All regulations and amendments thereto with re-  
6 spect to grants to States under this section shall be made  
7 after consultation with a conference of the State health  
8 authorities.

9 (i) Funds appropriated under subsection (a) or (b)  
10 of this section, in addition to being available for payments  
11 to States, shall also be available for expenditure by the Sur-  
12 geon General in otherwise carrying out such subsection, in-  
13 cluding expenditures for printing and binding of the findings  
14 of investigations, and for pay and allowances and traveling  
15 expenses of personnel of the Service engaged in activities  
16 authorized by such subsection.

17 HEALTH EDUCATION AND INFORMATION

18 SEC. 315. From time to time the Surgeon General shall  
19 issue information related to public health, in the form of publi-  
20 cations or otherwise, for the use of the public, and shall  
21 publish weekly reports of health conditions in the United  
22 States and other countries and other pertinent health informa-  
23 tion for the use of persons and institutions engaged in work  
24 related to the functions of the Service.

## 1 PART C—HOSPITALS, MEDICAL EXAMINATIONS, AND

## 2 MEDICAL CARE

## 3 HOSPITALS

4 SEC. 321. The Surgeon General, pursuant to regulations,

5 shall—

6 (a) Control, manage, and operate all institutions,  
7 hospitals, and stations of the Service, and provide for  
8 the care and treatment of patients, including the furnish-  
9 ing of prosthetic and orthopedic devices;

10 (b) Provide for the transfer of Public Health Serv-  
11 ice patients (in the care of attendants where necessary)  
12 between hospitals and stations operated by the Service  
13 or between such hospitals and stations and other hos-  
14 pitals and stations in which Public Health Service  
15 patients may be received, and the payment of expenses  
16 of such transfer;

17 (c) Provide for the disposal of articles produced  
18 by patients in the course of their curative treatment,  
19 either by allowing the patient to retain such articles or  
20 by selling them and depositing the money received  
21 therefor to the credit of the appropriation from which  
22 the materials for making the articles were purchased;  
23 and



1 (d) Provide for the disposal of money and effects,  
2 in the custody of the hospitals or stations, of deceased  
3 patients.

4 CARE AND TREATMENT OF SEAMEN AND CERTAIN OTHER  
5 PERSONS

6 SEC. 322. (a) The following persons shall be entitled,  
7 in accordance with regulations, to medical, surgical, and  
8 dental treatment and hospitalization without charge at hos-  
9 pitals and other stations of the Service:

10 (1) Seamen employed on vessels of the United  
11 States registered, enrolled, and licensed under the mari-  
12 time laws thereof, other than canal boats engaged in the  
13 coasting trade;

14 (2) Seamen employed on United States or foreign  
15 flag vessels as employees of the United States through  
16 the War Shipping Administration;

17 (3) Seamen, not enlisted or commissioned in the  
18 military or naval establishments, who are employed on  
19 State school ships or on vessels of the United States  
20 Government (other than those of the Panama Canal)  
21 of more than five tons' burden;

22 (4) Cadets on State school ships;

23 (5) Seamen on vessels of the Mississippi River



1 Commission and, upon application of their commanding  
2 officers, officers and crews of vessels of the Fish and  
3 Wildlife Service;

4 (6) Enrollees in the United States Maritime Service  
5 on active duty and members of the Merchant Marine  
6 Cadet Corps; and

7 (7) Employees and noncommissioned officers of the  
8 Public Health Service when injured or taken sick in  
9 line of duty.

10 (b) When suitable accommodations are available, sea-  
11 men on foreign-flag vessels may be given medical, surgical,  
12 and dental treatment and hospitalization on application of  
13 the master, owner, or agent of the vessel at hospitals and  
14 other stations of the Service at rates fixed by regulations.  
15 All expenses connected with such treatment, including burial  
16 in the event of death, shall be paid by such master, owner,  
17 or agent. No such vessel shall be granted clearance until  
18 such expenses are paid or their payment appropriately guar-  
19 anteed to the Collector of Customs.

20 (c) Seamen on foreign-flag vessels, and any person  
21 when detained in accordance with quarantine or immigration  
22 laws or regulations, may be treated and cared for by the  
23 Service.

24 (d) Persons not entitled to treatment and care at insti-  
25 tutions, hospitals, and stations of the Service may, in accord-

1   ance with regulations of the Surgeon General, be admitted  
2   thereto for temporary treatment and care in case of  
3   emergency.

4       (e) Persons entitled to care and treatment under subsec-  
5   tion (a) of this section may, in accordance with regulations  
6   receive such care and treatment at the expense of the Service  
7   from public or private medical or hospital facilities other than  
8   those of the Service, when authorized by the officer in charge  
9   of the station at which the application is made.

10       CARE AND TREATMENT OF FEDERAL PRISONERS

11       SEC. 323. The Service shall supervise and furnish med-  
12   ical treatment and other necessary medical, psychiatric, and  
13   related technical and scientific services, authorized by the  
14   Act of May 13, 1930, as amended (U. S. C., title 18, sections  
15   751, 752), in Federal penal and correctional institutions of  
16   the United States.

17       EXAMINATION AND TREATMENT OF FEDERAL EMPLOYEES

18       SEC. 324. The Surgeon General is authorized to provide  
19   at institutions, hospitals, and stations of the Service medical,  
20   surgical, and hospital services and supplies for civilian em-  
21   ployees entitled to treatment under the United States Em-  
22   ployees' Compensation Act. The Surgeon General may also  
23   provide for making medical examinations of—

1 (a) employees of the Alaska Railroad and employ-  
2 ees of the Federal Government for retirement purposes;

3 (b) employees in the Federal classified service as  
4 requested by the Civil Service Commission for the pur-  
5 pose of promoting health and efficiency and minimizing  
6 accidents among Federal employees; and

7 (c) seamen for purposes of qualifying for certificates  
8 of service.

9 EXAMINATION OF ALIENS

10 SEC. 325. The Surgeon General shall provide for making  
11 such physical and mental examinations of arriving aliens as  
12 are required by the immigration laws, subject to administra-  
13 tive regulations prescribed by the Attorney General and  
14 medical regulations prescribed by the Surgeon General with  
15 the approval of the Administrator.

16 COAST GUARD, COAST AND GEODETIC SURVEY, AND PUBLIC

17 HEALTH SERVICE

18 SEC. 326. (a) Pursuant to regulations approved by the  
19 President (1) all commissioned officers, chief warrant officers,  
20 warrant officers, cadets, and enlisted personnel of the Coast  
21 Guard and Coast and Geodetic Survey, including those on  
22 shore duty and those on detached duty, whether on active  
23 duty or retired; (2) commissioned officers of the Service,  
24 whether on active duty or retired; (3) the officers and mem-  
25 bers of the crews of vessels of the Coast Guard and the Coast

1 and Geodetic Survey, whether on active duty or retired;  
2 (4) civilian keepers and assistant keepers in the Coast  
3 Guard, whether on active duty or retired; and (5) retired  
4 officers and employees of the former Lighthouse Service  
5 shall be entitled to medical, surgical, and dental treatment  
6 and hospitalization (including the furnishing of supplies and  
7 prosthetic and orthopedic appliances incident thereto) by the  
8 Service.

9 (b) The dependent members of families of commissioned  
10 officers of the Service and of officers and enlisted personnel of  
11 the Coast Guard and the Coast and Geodetic Survey shall  
12 be furnished medical advice and out-patient treatment by the  
13 Service at its hospitals and relief stations and they shall  
14 also be furnished hospitalization at hospitals of the Service,  
15 if suitable accommodations are available, at a per diem cost  
16 to the officer or enlisted person concerned. Such cost shall  
17 be equivalent to the uniform per diem reimbursement rate,  
18 approved by the President for Government hospitals for the  
19 fiscal year in which such hospitalization is furnished.

20 (c) The Service shall provide all services referred to in  
21 subsection (a) required by the Coast Guard and shall per-  
22 form all necessary duties prescribed by statute in connection  
23 with the examinations to determine physical or mental con-  
24 dition for purposes of appointment, enlistment, and reenlist-  
25 ment, promotion and retirement, and officers of the Service



1 assigned to duty on Coast Guard vessels may extend aid to  
2 the crews of American vessels engaged in deep-sea fishing.

3 PART D—LEPERS

4 RECEIPT OF LEPERS

5 SEC. 331. The Service shall, in accordance with regu-  
6 lations, receive into any hospital of the Service suitable for  
7 his accommodation any person afflicted with leprosy who  
8 presents himself for care, detention, or treatment, or who may  
9 be apprehended under sections 332 or 361 of this Act, and  
10 any person afflicted with leprosy duly consigned to the care  
11 of the Service by the proper health authority of any State,  
12 Territory, or the District of Columbia. The Surgeon General  
13 is authorized, upon the request of any health authority, to  
14 send for any person within the jurisdiction of such authority  
15 who is afflicted with leprosy and to convey such person to the  
16 appropriate hospital for detention and treatment. When the  
17 transportation of any such person is undertaken for the pro-  
18 tection of the public health the expense of such removal shall  
19 be met from funds available for the maintenance of hospitals  
20 of the Service.

21 APPREHENSION, DETENTION, TREATMENT, AND RELEASE

22 SEC. 332. The Surgeon General may provide by regu-  
23 lation for the apprehension, detention, treatment, and release  
24 of persons being treated by the Service for leprosy.



## PART E—NARCOTICS ADDICTS

## CARE AND TREATMENT

SEC. 341. The Surgeon General is authorized to provide for the confinement, care, protection, treatment, including the furnishing of prosthetic and orthopedic appliances, and discipline of persons addicted to the use of habit-forming narcotic drugs who voluntarily submit themselves for treatment and addicts who have been or are hereafter convicted of offenses against the United States, including persons convicted by general courts martial and consular courts. Such care and treatment shall be provided at hospitals of the Service especially equipped for the accommodation of such patients and shall be designed to rehabilitate such persons, to restore them to health, and, where necessary, to train them to be self-supporting and self-reliant.

## EMPLOYMENT OF ADDICTS

SEC. 342. Narcotic addicts in hospitals of the Service designated for their care shall be employed in such manner and under such conditions as the Surgeon General may direct. In such hospitals the Surgeon General may, in his discretion, establish industries, plants, factories, or shops for the production and manufacture of articles, commodities, and supplies for the United States Government. The Secretary of the Treasury may require any Government department, estab-

1 lishment, or other institution, for whom appropriations are  
2 made directly or indirectly by the Congress of the United  
3 States, to purchase at current market prices, as determined  
4 by him or his authorized representative, such of the articles,  
5 commodities, or supplies so produced or manufactured as  
6 meet their specifications; and the Surgeon General shall pro-  
7 vide for payment to the inmates or their dependents of such  
8 pecuniary earnings as he may deem proper. The Adminis-  
9 trator shall establish a working-capital fund for such in-  
10 dustries, plants, factories, and shops out of any funds appro-  
11 priated for Public Health Service hospitals at which addicts  
12 are treated and cared for; and such fund shall be available  
13 for the purchase, repair, or replacement of machinery or  
14 equipment, for the purchase of raw materials and supplies,  
15 for the purchase of uniforms and other distinctive wearing  
16 apparel of employees in the performance of their official  
17 duties, and for the employment of necessary civilian officers  
18 and employees. The Surgeon General may provide for the  
19 disposal of byproducts of the industrial activities conducted  
20 pursuant to this section, and the proceeds of any sales thereof  
21 shall be covered into the Treasury of the United States to the  
22 credit of the working-capital fund.

23

## CONVICTS

24

SEC. 343. (a) The authority vested with the power to  
25 designate the place of confinement of a prisoner shall transfer

1 to hospitals of the Service especially equipped for the ac-  
2 commodation of addicts, if accommodations are available,  
3 all addicts who have been or are hereafter sentenced to con-  
4 finement, or who are now or shall hereafter be confined, in  
5 any penal, correctional, disciplinary, or reformatory institu-  
6 tion of the United States, including those addicts convicted  
7 of offenses against the United States who are confined in  
8 State and Territorial prisons, penitentiaries, and reformatories,  
9 except that no addict shall be transferred to a hospital of the  
10 Service who, in the opinion of the officer authorized to direct  
11 the transfer, is not a proper subject for confinement in such  
12 an institution either because of the nature of the crime he has  
13 committed or because of his apparent incorrigibility. The  
14 authority vested with the power to designate the place of  
15 confinement of a prisoner shall transfer from a hospital of the  
16 Service to the institution from which he was received, or to  
17 such other institution as may be designated by the proper  
18 authority, any addict whose presence at a hospital of the  
19 Service is detrimental to the well-being of the hospital or who  
20 does not continue to be a narcotic addict. All transfers of  
21 such prisoners to or from a hospital of the Service shall be  
22 accompanied by necessary attendants as directed by the  
23 officer in charge of such hospital and the actual and necessary  
24 expenses incident to such transfers shall be paid from the  
25 appropriation for the maintenance of such Service hospital

1 except to the extent that other Federal agencies are author-  
2 ized or required by law to pay expenses incident to such  
3 transfers. Whenever an alien addict transferred to a Serv-  
4 ice hospital pursuant to this subsection is entitled to his dis-  
5 charge but is subject to deportation, in lieu of being returned  
6 to the penal institution from which he came he shall be de-  
7 ported by the authority vested by law with power over  
8 deportation.

9       (b) (1) Any narcotic addict confined in any institu-  
10 tion, who has been convicted of an offense against  
11 the United States, shall not be eligible for parole under  
12 sections 1 to 8, inclusive, of the Act of June 25, 1910, as  
13 amended (U. S. C., 1940 edition, title 18, sections 714-  
14 723) or under the provisions of any Act or regulation relat-  
15 ing to parole, nor, except in accordance with clause (2),  
16 shall he receive any commutation allowance for good con-  
17 duct in accordance with the provisions of the Act of June  
18 21, 1902, as amended (U. S. C., 1940 edition, title 18, sec-  
19 tions 710-712a), and Acts supplemental thereto, unless and  
20 until the Surgeon General shall have certified that said  
21 individual is no longer an addict. When such certificate shall  
22 have been made, the board of parole of the penal, correc-  
23 tional, disciplinary, or reformatory institution from which  
24 such former addict was transferred may authorize his release  
25 on parole without transfer back to such institution.



1       (2) The Act of June 21, 1902, as amended (U. S. C.,  
2 1940 edition, title 18, sections 710-712a), providing for  
3 commutation of sentences of United States prisoners for good  
4 conduct, shall be applicable to any prisoner engaged in any  
5 industry, plant, factory, or shop established under section  
6 342; and in addition thereto each such prisoner, without  
7 regard to length of sentence, may, in the discretion of the  
8 Surgeon General, be allowed, under the same terms and  
9 conditions as provided in the Act of Congress referred to in  
10 this section, a deduction in his sentence of not to exceed  
11 three days for each month of actual employment in said  
12 industry, plant, factory, or shop for the first year or any  
13 part thereof, and for any succeeding year or any part thereof  
14 not to exceed five days for each month of actual employment  
15 in said industry, plant, factory, or shop.

16       (c) Not later than one month prior to the expiration  
17 of the sentence of any addict confined in a Service hospital,  
18 he shall be examined by the Surgeon General or his author-  
19 ized representative. If the Surgeon General believes the  
20 person to be discharged is still an addict and that he may by  
21 further treatment in a Service hospital be cured of his ad-  
22 diction, the addict shall be informed, in accordance with  
23 regulations, of the advisability of his submitting himself to  
24 further treatment. The addict may then apply in writing



1 to the Surgeon General for further treatment in a Service  
2 hospital for a period not exceeding the maximum length of  
3 time considered necessary by the Surgeon General. Upon  
4 approval of the application by the Surgeon General or his  
5 authorized agent, the addict may be given such further  
6 treatment as is necessary to cure him of his addiction.

7 (d) Every person convicted of an offense against the  
8 United States upon discharge, or upon his release on parole,  
9 from a hospital of the Service shall be furnished with the gra-  
10 tuities and transportation authorized by law to be furnished  
11 to prisoners upon release from a penal, correctional, disci-  
12 plinary, or reformatory institution.

13 (e) Any court of the United States having the power  
14 to suspend the imposition or execution of sentence and to  
15 place a defendant on probation under any existing laws may  
16 impose as one of the conditions of such probation that the  
17 defendant, if an addict, shall submit himself for treatment  
18 at a hospital of the Service especially equipped for the  
19 accommodation of addicts until discharged therefrom as  
20 cured and that he shall be admitted thereto for such purpose.  
21 Upon the discharge of any such probationer from a hospital  
22 of the Service, he shall be furnished with the gratuities and  
23 transportation authorized by law to be furnished to prisoners  
24 upon release from a penal, correctional, disciplinary, or  
25 reformatory institution. The actual and necessary expense

1 incident to transporting such probationer to such hospital  
2 and to furnishing such transportation and gratuities shall  
3 be paid from the appropriation for the maintenance of such  
4 hospital except to the extent that other Federal agencies  
5 are authorized or required by law to pay the cost of such  
6 transportation: *Provided*, That where existing law vests a  
7 discretion in any officer as to the place to which transporta-  
8 tion shall be furnished or as to the amount of clothing and  
9 gratuities to be furnished, such discretion shall be exercised  
10 by the Surgeon General with respect to addicts discharged  
11 from hospitals of the Service.

12 VOLUNTARY PATIENTS

13 SEC. 344. (a) Any addict, whether or not he shall have  
14 been convicted of an offense against the United States, may  
15 apply to the Surgeon General for admission to a hospital  
16 of the Service especially equipped for the accommodation  
17 of addicts.

18 (b) Any applicant shall be examined by the Surgeon  
19 General who shall determine whether the applicant is an  
20 addict, whether by treatment in a hospital of the Service he  
21 may probably be cured of his addiction and the estimated  
22 length of time necessary to effect his cure. The Surgeon  
23 General may, in his discretion, admit the applicant to a Serv-  
24 ice hospital. No such addict shall be admitted unless he  
25 agrees to submit to treatment for the maximum amount of

1 time estimated by the Surgeon General to be necessary to  
2 effect a cure, and unless suitable accommodations are avail-  
3 able after all eligible addicts convicted of offenses against  
4 the United States have been admitted. Any such addict  
5 may be required to pay for his subsistence, care, and treat-  
6 ment at rates fixed by the Surgeon General and amounts so  
7 paid shall be covered into the Treasury of the United States  
8 to the credit of the appropriation from which the expenditure  
9 for his subsistence, care, and treatment was made.

10 (d) Any addict admitted for treatment under this section  
11 may be confined in a hospital of the Service for a period not  
12 exceeding the maximum amount of time estimated by the  
13 Surgeon General as necessary to effect a cure of the addiction  
14 or until such time as he ceases to be an addict.

15 (c) Any addict admitted for treatment under this section  
16 shall not thereby forfeit or abridge any of his rights as a  
17 citizen of the United States; nor shall such admission or  
18 treatment be used against him in any proceeding in any  
19 court; and the record of his voluntary commitment shall be  
20 confidential and shall not be divulged.

21

## PENALTIES

22 SEC. 345. (a) Any person not authorized by law or by  
23 the Surgeon General who introduces or attempts to introduce  
24 into a hospital of the Service at which addicts are treated  
25 and cared for, or within the grounds adjoining or adjacent

1 thereto, any habit-forming narcotic drugs, weapon, or any  
 2 other article or thing specified in regulations, including any  
 3 letter, message, or alcoholic beverage so specified, which is  
 4 intended to be received by an inmate thereof, shall be guilty  
 5 of a felony punishable by confinement in a penitentiary for  
 6 a period of not more than ten years.

7 (b) It shall be unlawful for any person properly com-  
 8 mitted thereto to escape or attempt to escape from a hos-  
 9 pital of the Service for the cure of addicts, and any such  
 10 person upon apprehension and conviction in a United States  
 11 court shall be punished by imprisonment for not more than  
 12 five years, such sentence to begin upon the expiration of the  
 13 sentence for which such person was originally confined.

14 (c) Any person who procures the escape of any person  
 15 admitted to a hospital of the Service for the care of addicts  
 16 or who advises, connives at, aids, or assists in such escape,  
 17 or who conceals any such inmate after such escape, shall be  
 18 punished upon conviction in a United States court by im-  
 19 prisonment in the penitentiary for not more than three years.

## 20 PART F—BIOLOGICAL PRODUCTS

### 21 REGULATION OF BIOLOGICAL PRODUCTS

22 SEC. 351. (a) No person shall sell, barter, or exchange,  
 23 or offer for sale, barter, or exchange in the District of Colum-  
 24 bia, or send, carry, or bring for sale, barter, or exchange  
 25 from any State or possession into any other State or pos-



1 session or into any foreign country, or from any foreign  
2 country into any State or possession, any virus, therapeutic  
3 serum, toxin, antitoxin, or analogous product, or arsphen-  
4 mine or its derivatives (or any other organic arsenic com-  
5 pound analogous thereto), applicable to the prevention, treat-  
6 ment, or cure of diseases or injuries of man, unless (1) such  
7 virus, serum toxin, antitoxin, or other product has been prop-  
8 agated or manufactured and prepared at an establishment  
9 holding an unsuspended and unrevoked license, issued by  
10 the Administrator as hereinafter authorized, to propagate  
11 or manufacture, and prepare such virus, serum, toxin,  
12 antitoxin, or other product for sale in the District of  
13 Columbia, or for sending, bringing, or carrying from place  
14 to place aforesaid; and (2) each package of such virus,  
15 serum, toxin, antitoxin, or other product is plainly marked  
16 with the proper name of the article contained therein, the  
17 name, address, and license number of the manufacturer, and  
18 the date beyond which the contents cannot be expected  
19 beyond reasonable doubt to yield their specific results. The  
20 suspension or revocation of any license shall not prevent the  
21 sale, barter, or exchange of any virus, serum, toxin, anti-  
22 toxin, or other product aforesaid which has been sold and  
23 delivered by the licensee prior to such suspension or revoca-  
24 tion, unless the owner or custodian of such virus, serum, toxin,



1 antitoxin, or other product aforesaid has been notified by the  
2 Administrator not to sell, barter, or exchange the same.

3 (b) No person shall falsely label or mark any package  
4 or container of any virus, serum, toxin, antitoxin, or other  
5 product aforesaid; nor alter any label or mark on any package  
6 or container of any virus, serum, toxin, antitoxin, or other  
7 product aforesaid so as to falsify such label or mark.

8 (c) Any officer, agent, or employee of the Service, au-  
9 thorized by the Surgeon General for the purpose, may during  
10 all reasonable hours enter and inspect any establishment for  
11 the propagation or manufacture and preparation of any virus,  
12 serum, toxin, antitoxin, or other product aforesaid for sale,  
13 barter, or exchange in the District of Columbia, or to be sent,  
14 carried, or brought from any State or possession into any  
15 other State or possession or into any foreign country, or  
16 from any foreign country into any State or possession.

17 (d) Licenses for the maintenance of establishments for  
18 the propagation or manufacture and preparation of products  
19 described in subsection (a) of this section may be issued only  
20 upon a showing that the establishment and the products for  
21 which a license is desired meet standards, designed to insure  
22 the continued safety, purity, potency and efficaciousness of  
23 such products, prescribed in regulations made jointly by the  
24 Surgeon General, the Surgeon General of the Army, and the

1 Surgeon General of the Navy, and approved by the Adminis-  
2 trator, and licenses for new products may be issued only upon  
3 a showing that they meet such standards. All such licenses  
4 shall be issued, suspended, and revoked as prescribed by regu-  
5 lations and all licenses issued for the maintenance of estab-  
6 lishments for the propagation or manufacture and prepara-  
7 tion, in any foreign country, of any such products for sale,  
8 barter, or exchange in any State or possession shall be issued  
9 upon condition that the licensees will permit the inspection  
10 of their establishments in accordance with subsection (c)  
11 of this section.

12 (e) No person shall interfere with any officer, agent,  
13 or employee of the Service in the performance of any duty  
14 imposed upon him by this section or by regulations made  
15 by authority thereof.

16 (f) Any person who shall violate, or aid or abet in  
17 violating, any of the provisions of this section shall be pun-  
18 ished upon conviction by a fine not exceeding \$500 or by  
19 imprisonment not exceeding one year, or by both such fine  
20 and imprisonment, in the discretion of the court.

21 PREPARATION OF BIOLOGICAL PRODUCTS

22 SEC. 352. (a) The Service may prepare for its own use  
23 any product described in section 351 and any product neces-  
24 sary to carrying out any of the purposes of section 301.

1       (b) The Service may prepare any product described in  
2 section 351 for the use of other Federal departments or  
3 agencies, and public or private agencies and individuals  
4 engaged in work in the field of medicine when such product  
5 is not available from establishments licensed under such  
6 section.

7           PART G—QUARANTINE AND INSPECTION  
8                   CONTROL OF COMMUNICABLE DISEASES

9       SEC. 361. (a) The Surgeon General, with the approval  
10 of the Administrator, is authorized to make and enforce such  
11 regulations as in his judgment are necessary to prevent the  
12 introduction, transmission, or spread of communicable diseases  
13 from foreign countries into the States or possessions, or from  
14 one State or possession into any other State or possession.  
15 For purposes of carrying out and enforcing such regulations,  
16 the Surgeon General may provide for such inspection, fumi-  
17 gation, disinfection, sanitation, pest extermination, and other  
18 measures as in his judgment may be necessary.

19       (b) Regulations prescribed under this section shall not  
20 provide for the apprehension, detention, or conditional re-  
21 lease of individuals except for the purpose of preventing the  
22 introduction, transmission, or spread of such communicable  
23 diseases as may be specified from time to time in Executive

1 orders of the President upon the recommendation of the Na-  
2 tional Advisory Health Council and the Surgeon General.

3 (c) Except as provided in subsection (d), regulations  
4 prescribed under this section, insofar as they provide for  
5 the apprehension, detention, examination, or conditional re-  
6 lease of individuals, shall be applicable only to individuals  
7 coming into a State or possession from a foreign country, the  
8 Territory of Hawaii, or a possession.

9 (d) On recommendation of the National Advisory  
10 Health Council, regulations prescribed under this section may  
11 provide for the apprehension and examination of any indi-  
12 vidual reasonably believed to be infected with a communi-  
13 cable disease in a communicable stage and (1) to be mov-  
14 ing or about to move from a State to another State; or (2)  
15 to be a probable source of infection to individuals who, while  
16 infected with such disease in a communicable stage, will be  
17 moving from a State to another State. Such regulations may  
18 provide that if upon examination any such individual is  
19 found to be infected, he may be detained for such time and  
20 in such manner as may be reasonably necessary.

21 SUSPENSION OF ENTRIES AND IMPORTS FROM DESIGNATED  
22 PLACES

23 SEC. 362. Whenever the Surgeon General determines  
24 that by reason of the existence of any communicable disease  
25 in a foreign country there is serious danger of the introduction



1 of such disease into the United States, and that this danger  
2 is so increased by the introduction of persons or property from  
3 such country that a suspension of the right to introduce such  
4 persons and property is required in the interest of the public  
5 health, the Surgeon General, in accordance with regulations  
6 approved by the President, shall have the power to prohibit,  
7 in whole or in part, the introduction of persons and property  
8 from such countries or places as he shall designate in order to  
9 avert such danger, and for such period of time as he may  
10 deem necessary for such purpose.

11 SPECIAL POWERS IN TIME OF WAR

12 SEC. 363. To protect the military and naval forces and  
13 war workers of the United States, in time of war, against  
14 any communicable disease specified in Executive orders as  
15 provided in subsection (b) of section 361, the Surgeon Gen-  
16 eral, on recommendation of the National Advisory Health  
17 Council, is authorized to provide by regulations for the ap-  
18 prehension and examination, in time of war, of any individual  
19 reasonably believed (1) to be infected with such disease, in a  
20 communicable stage and (2) to be a probable source of in-  
21 fection to members of the armed forces of the United States  
22 or to individuals engaged in the production or transportation  
23 of arms, munitions, ships, food, clothing, or other supplies  
24 for the armed forces. Such regulations may provide that  
25 upon examination any such individual is found to be so in-

1 fected, he may be detained for such time and in such manner  
2 as may be reasonably necessary.

3 QUARANTINE STATIONS

4 SEC. 364. (a) Except as provided in title II of the  
5 Act of June 15, 1917 (40 Stat. 220), as amended (50  
6 U. S. C. 1940 edition, secs. 191-194), the Surgeon General  
7 shall control, direct, and manage all United States quarantine  
8 stations, grounds, and anchorages, designate their boundaries,  
9 and designate the quarantine officers to be in charge thereof.  
10 With the approval of the President he shall from time to time  
11 select suitable sites for and establish such additional stations,  
12 grounds, and anchorages in the States and possessions of the  
13 United States as in his judgment are necessary to prevent the  
14 introduction of communicable diseases into the States and  
15 possessions of the United States.

16 (b) The Surgeon General shall establish by regulation  
17 the hours during which quarantine service shall be performed  
18 at each quarantine station, and, upon application by any  
19 interested party, may establish quarantine inspection during  
20 the twenty-four hours of the day, or any fraction thereof,  
21 at such quarantine stations as, in his opinion, require such  
22 extended service. He may restrict the performance of  
23 quarantine inspection to hours of daylight for such arriving  
24 vessels as cannot, in his opinion, be satisfactorily inspected  
25 during hours of darkness. No vessel shall be required to

1 undergo quarantine inspection during the hours of darkness,  
2 unless the quarantine officer at such quarantine station shall  
3 deem an immediate inspection necessary to protect the public  
4 health. Uniformity shall not be required in the regulations  
5 governing the hours during which quarantine inspection may  
6 be obtained at the various ports of the United States.

7 CERTAIN DUTIES OF CONSULAR AND OTHER OFFICERS

8 SEC. 365. (a) Whenever any vessel shall leave any port  
9 or place, infected with any communicable disease, in any for-  
10 eign country or in the Territories or possessions of the United  
11 States, or, having on board goods or passengers coming from  
12 any place so infected, shall leave any such port or place,  
13 bound for any port or place in a State or a possession of  
14 the United States, the consular officer of the United States  
15 or the Public Health Service officer, or other medical officer  
16 of the United States designated by the Surgeon General, at  
17 or nearest such port of departure shall immediately notify  
18 the Surgeon General of the name, the date of departure, and  
19 the port of destination of such vessel. Each such consular or  
20 other officer shall also make reports to the Surgeon General  
21 of the health conditions at the port or place at which he is  
22 stationed on such forms and at such intervals as the Surgeon  
23 General shall prescribe.

24 (b) It shall be the duty of the customs officers, and of  
25 Coast Guard officers under their direction, to aid in the en-

1   forcement of quarantine rules and regulations; but no addi-  
2   tional compensation, except actual and necessary traveling  
3   expenses, shall be allowed any such officer by reason of such  
4   services.

5                                   BILLS OF HEALTH

6       SEC. 366. (a) Any vessel at any foreign port or place  
7   clearing or departing for any port or place in a State or  
8   possession shall be required to obtain from the consular officer  
9   of the United States or from the Public Health Service officer,  
10   or other medical officer of the United States designated by  
11   the Surgeon General, at the port or place of departure, a bill  
12   of health in duplicate, in the form prescribed by the Surgeon  
13   General. The President, from time to time, shall specify  
14   the ports at which a medical officer shall be stationed for  
15   this purpose. Such bill of health shall set forth the sanitary  
16   history and condition of said vessel, and shall state that it  
17   has in all respects complied with the regulations prescribed  
18   pursuant to subsection (c). Before granting such duplicate  
19   bill of health, such consular or medical officer shall be satis-  
20   fied that the matters and things therein stated are true.  
21   The consular officer shall be entitled to demand and receive  
22   the fees for bills of health and such fees shall be established  
23   by regulation.

24       (b) Original bills of health shall be delivered to the



1 collectors of customs at the port of entry. Duplicate copies  
2 of such bills of health shall be delivered at the time of  
3 inspection to quarantine officers at such port. The bills of  
4 health herein prescribed shall be considered as part of the  
5 ship's papers, and when duly certified to by the proper con-  
6 sular or other officer of the United States, over his official  
7 signature and seal, shall be accepted as evidence of the  
8 statements therein contained in any court of the United  
9 States.

10 (c) The Surgeon General shall from time to time pre-  
11 scribe regulations, applicable to vessels referred to in sub-  
12 section (a) of this section for the purpose of preventing the  
13 introduction into the States or possessions of the United  
14 States of any communicable disease by securing the best  
15 sanitary condition of such vessels, their cargoes, passengers,  
16 and crews. Such regulations shall be observed by such  
17 vessels prior to departure, during the course of the voyage,  
18 and also during inspection, disinfection, or other quarantine  
19 procedure upon arrival at any United States quarantine  
20 station.

21 (d) The provisions of subsections (a) and (b) of this  
22 section shall not apply to vessels plying between such foreign  
23 ports on or near the frontiers of the United States and ports  
24 of the United States as are designated by treaty or may be

1 designated by regulation; nor, to the extent prescribed by  
2 regulations, to such of the other vessels referred to in sub-  
3 section (a) hereof as may be designated in such regulations.

4 (e) It shall be unlawful for any vessel to enter any port  
5 in any State or possession of the United States to discharge  
6 its cargo, or land its passengers, except upon a certificate  
7 of the quarantine officer that regulations prescribed under  
8 subsection (c) have in all respects been complied with by  
9 such officer, the vessel, and its master. The master of every  
10 such vessel shall deliver such certificate to the collector of  
11 customs at the port of entry, together with the original bill  
12 of health and other papers of the vessel.

13 CIVIL AIR NAVIGATION AND CIVIL AIRCRAFT

14 SEC. 367. The Surgeon General is authorized to pro-  
15 vide by regulations for the application to civil air navigation  
16 and civil aircraft of any of the provisions of sections 364,  
17 365, and 366 and regulations prescribed thereunder (includ-  
18 ing penalties and forfeitures for violations thereof), to such  
19 extent and upon such conditions as he deems necessary for  
20 the safeguarding of the public health.

21 PENALTIES

22 SEC. 368. (a) Any person who violates any regula-  
23 tion prescribed under section 361, 362, or 363, or any  
24 provision of section 366 or any regulation prescribed there-  
25 under, or who enters or departs from the limits of any quar-

1 antine station, ground, or anchorage in disregard of quaran-  
2 tine rules and regulations or without permission of the  
3 quarantine officer in charge, shall be punished by a fine of  
4 not more than \$1,000 or by imprisonment for not more than  
5 two years, or both.

6 (b) Any vessel which violates section 364 or section  
7 366, or any regulations thereunder, or in accordance with  
8 section 367, or which enters within or departs from the  
9 limits of any quarantine station, ground, or anchorage in  
10 disregard of the quarantine rules and regulations or without  
11 permission of the officer in charge, shall forfeit to the United  
12 States not more than \$5,000, the amount to be determined  
13 by the court, which shall be a lien on such vessel, to be recov-  
14 ered by proceedings in the proper district court of the United  
15 States. In all such proceedings the United States district  
16 attorney shall appear on behalf of the United States; and all  
17 such proceedings shall be conducted in accordance with the  
18 rules and laws governing cases of seizure of vessels for vio-  
19 lation of the revenue laws of the United States.

20 (c) With the approval of the Administrator, the Surgeon  
21 General may, upon application therefor, remit or mitigate any  
22 forfeiture provided for under subsection (b) of this section,  
23 and he shall have authority to ascertain the facts upon all  
24 such applications.

## ADMINISTRATION OF OATHS

SEC. 369. Medical officers of the United States, when performing duties as quarantine officers at any port or place within the United States, are authorized to take declarations and administer oaths in matters pertaining to the administration of the quarantine laws and regulations of the United States.

## APPROPRIATIONS

SEC. 370. There are hereby authorized to be appropriated from time to time sums sufficient to provide such additional facilities as may be required by the Public Health Service for the discharge of its functions under this Act.

## TITLE IV—NATIONAL CANCER INSTITUTE

## TO BE A DIVISION IN NATIONAL INSTITUTE OF HEALTH

SEC. 401. The National Cancer Institute shall be a division in the National Institute of Health.

## CANCER RESEARCH, AND SO FORTH

SEC. 402. In carrying out the purposes of section 301 with respect to cancer the Surgeon General, through the National Cancer Institute and in cooperation with the National Cancer Advisory Council, shall—

(a) conduct, assist, and foster researches, investigations, experiments, and studies relating to the cause, prevention, and methods of diagnosis and treatment of cancer;



1 (b) promote the coordination of researches con-  
2 ducted by the Institute and similar researches conducted  
3 by other agencies, organizations, and individuals;

4 (c) provide training and instruction in technical  
5 matters relating to the diagnosis and treatment of cancer;

6 (d) provide fellowships in the Institute from funds  
7 appropriated or donated for such purpose;

8 (e) secure for the Institute consultation services and  
9 advice of cancer experts from the United States and  
10 abroad;

11 (f) cooperate with State health agencies in the  
12 prevention, control, and eradication of cancer;

13 (g) procure, use, and lend radium as provided in  
14 section 403.

#### 15 ADMINISTRATION

16 SEC. 403. (a) In carrying out the provisions of section  
17 402 all appropriate provisions of section 301 shall be ap-  
18 plicable to the authority of the Surgeon General, and he is  
19 authorized—

20 (1) to purchase radium, from time to time, without  
21 regard to section 3709 of the Revised Statutes, to make  
22 such radium available for the purposes of this title, both  
23 to the Service and by loan to other agencies and institu-  
24 tions for such consideration and subject to such condi-  
25 tions as he may prescribe;

1           (2) to provide the necessary facilities where train-  
2       ing and instruction may be given in all technical matters  
3       relating to diagnosis and treatment of cancer to persons  
4       found by the Surgeon General to have proper technical  
5       qualifications, and designated by him for such training  
6       or instruction, and to fix and pay them a per diem allow-  
7       ance during such training or instruction of not to exceed  
8       \$10.

9       (b) The Surgeon General shall recommend acceptance  
10     of conditional gifts pursuant to section 501, of this Act, for  
11     study, investigation, or research into the cause, prevention,  
12     and methods of diagnosis and treatment of cancer, or for the  
13     acquisition of grounds or for the erection, equipment, or main-  
14     tenance of premises, buildings, or equipment of the Institute,  
15     only after consultation with the National Cancer Advisory  
16     Council. Donations of \$50,000 or over in aid of research  
17     under this title may be acknowledged by the establishment  
18     within the Institute of suitable memorials to the donors.

19       (c) In carrying out the purposes of section 402 grants-  
20     in-aid for cancer projects shall be made only after review and  
21     recommendation of the National Cancer Advisory Council  
22     made pursuant to section 404.

23                               FUNCTIONS OF COUNCIL

24       SEC. 404. The Council is authorized—

25       (a) to review research projects or programs sub-

mitted to or initiated by it relating to the study of the cause, prevention, or methods of diagnosis and treatment of cancer, and certify approval to the Surgeon General for prosecution under section 402 any such projects which it believes show promise of making valuable contributions to human knowledge with respect to the cause, prevention, or methods of diagnosis and treatment of cancer;

(b) to collect information as to studies which are being carried on in the United States or any other country as to the cause, prevention, and methods of diagnosis and treatment of cancer, by correspondence or by personal investigation of such studies, and with the approval of the Surgeon General make available such information through the appropriate publications for the benefit of health agencies and organizations (public or private), physicians, or any other scientists, and for the information of the general public;

(c) to review applications from any university, hospital, laboratory, or other institution whether public or private, or from individuals, for grants-in-aid for research projects relating to cancer, and certify to the Surgeon General its approval of grants-in-aid in the cases of such projects which show promise of making valuable contributions to human knowledge with respect

1 to the cause, prevention, or methods of diagnosis or  
2 treatment of cancer ;

3 (d) to recommend to the Surgeon General for  
4 acceptance conditional gifts pursuant to section 501 of  
5 this Act ; and

6 (e) recommendations for administration of law.  
7 To make recommendations to the Surgeon General with  
8 respect to carrying out the provisions of this title.

9 APPROPRIATIONS

10 SEC. 405. Appropriations to carry out the purposes of  
11 this title shall be available for the acquisition of land or the  
12 erection of buildings only if so specified, but in the absence  
13 of express limitation therein may be expended in the Dis-  
14 trict of Columbia for personal services, stenographic recording  
15 and translating services, by contract if deemed necessary,  
16 without regard to section 3709 of the Revised Statutes ;  
17 traveling expenses (including the expenses of attendance at  
18 meetings when specifically authorized by the Surgeon Gen-  
19 eral) ; rental, supplies and equipment, purchase and exchange  
20 of medical books, books of reference, directories, periodicals,  
21 newspapers, and press clippings ; purchase, operation, and  
22 maintenance of motor-propelled passenger-carrying vehicles ;  
23 printing and binding (in addition to that otherwise provided  
24 by law) ; and for all other necessary expenses in carrying out  
25 the provisions of this title.



## OTHER WORK WITH RESPECT TO CANCER

SEC. 406. This title shall not be construed as limiting (1) the functions or authority of the Surgeon General or the Public Health Service under any other title of this Act, or of any other officer or agency of the United States, relating to the study of the prevention, diagnosis, and treatment of cancer; or (2) the expenditure of money therefor.

## TITLE V—MISCELLANEOUS

## GIFTS

SEC. 501. (a) The Administrator is authorized to accept on behalf of the United States gifts made unconditionally by will or otherwise for the benefit of the Service or for the carrying out of any of its functions. Conditional gifts may be so accepted if recommended by the Surgeon General, and the principal of and income from any such conditional gift shall be held, invested, reinvested, and used in accordance with its conditions, but no gift shall be accepted which is conditioned upon any expenditure not to be met therefrom or from the income thereof unless such expenditure has been approved by Act of Congress.

(b) Any unconditional gift of money accepted pursuant to the authority granted in subsection (a) of the section, the net proceeds from the liquidation (pursuant to subsection (c) or subsection (d) of this section) of any other property so accepted, and the proceeds of insurance on any such gift prop-

erty not used for its restoration, shall be deposited in the Treasury of the United States and are hereby appropriated and shall be held in trust by the Secretary of the Treasury for the benefit of the Service, and he may invest and reinvest such funds in interest-bearing obligations of the United States or in obligations guaranteed as to both principal and interest by the United States. Such gifts and the income from such investments shall be available for expenditure in the operation of the Service and the performance of its functions, subject to the same examination and audit as is provided for appropriations made for the Service by Congress.

(c) The evidences of any unconditional gift of intangible personal property, other than money, accepted pursuant to the authority granted in subsection (a) of this section shall be deposited with the Secretary of the Treasury and he, in his discretion, may hold them, or liquidate them except that they shall be liquidated upon the request of the Administrator, whenever necessary to meet payments required in the operation of the Service or the performance of its functions. The proceeds and income from any such property held by the Secretary of the Treasury shall be available for expenditure as is provided in subsection (b) of this section.

(d) The Administrator shall hold any real property or any tangible personal property accepted unconditionally pur-

1 suant to the authority granted in subsection (a) of this sec-  
2 tion and he shall permit such property to be used for the  
3 operation of the Service and the performance of its functions  
4 or he may lease or hire such property, and may insure such  
5 property, and deposit the income thereof with the Secretary  
6 of the Treasury to be available for expenditure as provided in  
7 subsection (b) of this section: *Provided*, That the income  
8 from any such real property or tangible personal property  
9 shall be available for expenditure in the discretion of the  
10 Administrator for the maintenance, preservation, or repair  
11 and insurance of such property and that any proceeds from  
12 insurance may be used to restore the property insured. Any  
13 such property when not required for the operation of the  
14 Service or the performance of its functions may be liquidated  
15 by the Administrator, and the proceeds thereof deposited  
16 with the Secretary of the Treasury, whenever in his judgment  
17 the purposes of the gifts will be served thereby.

18 USE OF IMMIGRATION STATION HOSPITALS

19 SEC. 502. The Immigration and Naturalization Service  
20 may, by agreement of the heads of the departments con-  
21 cerned, permit the Public Health Service to use hospitals at  
22 immigration stations for the care of Public Health Service  
23 patients. There shall be a charge for such use for the actual  
24 cost of fuel, light, water, telephone, and similar supplies and  
25 services, but no charge for the expense of physical upkeep.

1 of the hospitals. Such charges shall be covered into the  
2 proper Immigration and Naturalization Service appropri-  
3 ations.

4 MONEY COLLECTED FOR CARE OF PATIENTS

5 SEC. 503. The Immigration and Naturalization Service  
6 shall reimburse the Surgeon General for the care and treat-  
7 ment of individuals detained in hospitals of the Public Health  
8 Service under the immigration laws and regulations.  
9 Amounts so reimbursed, money collected as provided by law  
10 for expenses incurred in the care and treatment of foreign  
11 seamen, and money received for the care and treatment of  
12 pay patients shall be covered into the appropriation from  
13 which the expenses of such care and treatment were paid.

14 CARE OF PUBLIC HEALTH SERVICE PATIENTS AT SAINT

15 ELIZABETHS HOSPITAL

16 SEC. 504. Insane patients entitled to treatment by the  
17 Service shall be admitted, upon order of the Surgeon Gen-  
18 eral, into Saint Elizabeths Hospital or any hospital, insti-  
19 tution, or station of the Service especially equipped for the  
20 accommodation of such patients and shall be cared for and  
21 treated therein until cured or until ordered removed by him.  
22 Any reimbursement received as the result of such care and  
23 treatment shall be covered into the appropriation from which  
24 the expenses of such care and treatment were paid.



## SETTLEMENT OF CLAIMS

SEC. 505. The Administrator may consider, ascertain, adjust, and determine any claim which shall accrue, on account of damages occasioned by collisions or incident to the operation of vessels of the Service, and for which damages such vessels are found by him to be responsible. To be considered for settlement under this section, claims must be presented to the Administrator within one year of their accrual. The amount ascertained and determined to be due any claimant, not exceeding \$3,000 in any one case, shall be certified to Congress as a legal claim for payment out of appropriations that may be made therefor by Congress, together with a brief statement of the character of each claim, the amount claimed, and the amount allowed. Acceptance by any claimant of the amount determined to be due under this section shall be deemed to be in full and final settlement of such claim against the Government of the United States.

## TRANSPORTATION OF REMAINS OF OFFICERS

SEC. 506. Appropriations available for traveling expenses of the Service shall be available for meeting the cost of preparation for shipment and of transportation to their former homes of remains of commissioned officers, and personnel specified in regulations of the Surgeon General approved by the Administrator, who die in line of duty.

## 1 SETTLEMENT OF ACCOUNTS OF DECEASED OFFICERS

2 SEC. 507. (a) In the settlement of the accounts of de-  
3 ceased commissioned officers where the amount due the de-  
4 cedent's estate is less than \$1,000 and no demand is presented  
5 by a duly appointed representative of the estate, the account-  
6 ing officers may allow the amount found due to the decedent's  
7 widow or legal heirs in the following order of precedence:  
8 First, to the widow; second, if the decedent left no widow,  
9 or the widow be dead at time of settlement, then to the chil-  
10 dren or their issue, per stirpes; third, if no widow or children  
11 or their issue, then to the father and mother in equal parts,  
12 provided the father has not abandoned the support of his  
13 family, in which case to the mother alone; fourth, if either  
14 the father or mother be dead, then to the one surviving;  
15 fifth, if there be no widow, child, father, or mother at the  
16 date of settlement, then to the brothers and sisters and chil-  
17 dren of deceased brothers and sisters, per stirpes.

18 (b) Subsection (a) shall not be construed so as to pre-  
19 vent payment of funeral expenses from the amount due the de-  
20 cedent's estate if a claim therefor is presented, before settle-  
21 ment by the accounting officers, by the person or persons who  
22 actually paid such expenses.

## 23 ANNUAL REPORT

24 SEC. 508. The Surgeon General shall make a full report  
25 to Congress, at the beginning of each regular session, of the

1 administration of the functions of the Service under this Act,  
2 including a detailed statement of receipts and disbursements.

## 3 TITLE VI—TEMPORARY AND EMERGENCY

### 4 PROVISIONS AND REPEALS

#### 5 EXISTING POSITIONS, PROCEDURES, AND SO FORTH

6 SEC. 601. (a) The provisions of this Act shall not  
7 affect the term or tenure of office of the Surgeon General,  
8 or of any member of the National Advisory Health Council  
9 or the National Advisory Cancer Council, in office at the time  
10 of its enactment.

11 (b) Notwithstanding the provisions of this Act, exist-  
12 ing positions, divisions, committees, and procedures in the  
13 Public Health Service shall continue unless and until  
14 abolished, changed, or transferred pursuant to authority  
15 granted in this Act.

#### 16 EXISTING REGULATIONS, AND SO FORTH

17 SEC. 602. Notwithstanding the provisions of this Act,  
18 existing rules, regulations of or applicable to the Service, and  
19 Executive orders, shall remain in effect until repealed, or  
20 until modified or superseded by regulations made in accord-  
21 ance with the provisions of this Act.

#### 22 FUNDS, APPROPRIATIONS, AND PROPERTY

23 SEC. 603. All appropriations, allocations, and other  
24 funds, and all properties available for use by the Public  
25 Health Service or any division or unit thereof shall con-

1   tinue to be available to the Service and, for the purpose of  
2   any reorganization under section 2 of this Act, the Federal  
3   Security Administrator, with the approval of the Director  
4   of the Bureau of the Budget, is hereby authorized to make  
5   such transfer of funds between appropriations as may be  
6   necessary for the continuance of transferred functions.

## EMERGENCY FUND

8        SEC. 604. The sum of \$1,500,000 to be available until  
9    expended, is authorized to be appropriated for emergency  
10   construction or purchase of additional facilities and for the  
11   remodeling and extension of existing or newly acquired fa-  
12   cilities for use by the Public Health Service when found by  
13   the Administrator, with the approval of the President, to be  
14   necessary for the discharge of the functions of the Service  
15   during the present emergency. No expenditure from the sum  
16   herein authorized to be appropriated shall be incurred later  
17   than six months after the termination of the present war  
18   as proclaimed by the President or at such earlier time as the  
19   Congress may designate by concurrent resolution.

## EMPLOYEES' COMPENSATION

21 SEC. 605. (a) Section 7 of the Act of September 7,  
22 1916, entitled "An Act to provide compensation for employ-  
23 ees of the United States suffering injuries while in the per-  
24 formance of their duties, and for other purposes", as amended  
25 (U. S. C., 1940 edition, title 5, sec. 757), is amended by



1 changing the period at the end thereof to a colon and adding  
2 the following: "*Provided*, That any person who is eligible  
3 to receive any benefits authorized by this Act and who, by  
4 reason of services performed as an employee as defined in  
5 section 40, is also eligible under any other law of the United  
6 States to receive from the United States any payments or  
7 benefits (other than the proceeds of any insurance policy)  
8 for the same injury or death shall elect which benefits he shall  
9 receive but nothing in this Act shall prevent any such person  
10 at any time from claiming or receiving the greater benefit  
11 whether under this Act or any other such law."

12 (b) The definition of the term "employee" in section  
13 40 of such Act, as amended (U. S. C., 1940 edition, title 5,  
14 sec. 790), is amended to read as follows:

15 "The term 'employee' includes all civil officers and  
16 employees of the United States and of the Panama Railroad  
17 Company, including commissioned officers of the Regular  
18 Corps of the Public Health Service, officers in the Reserve  
19 of the Public Health Service on active duty, and all persons,  
20 other than independent contractors and their employees,  
21 employed on the Menominee Indian Reservation in the State  
22 of Wisconsin, subsequent to September 7, 1916, in opera-  
23 tions conducted pursuant to the Act entitled 'An Act to  
24 authorize the cutting of timber, the manufacture and sale of  
25 lumber, and the preservation of the forests on the Menominee

1 Indian Reservation in the State of Wisconsin,' approved  
2 March 28, 1908, as amended, or any other Act relating to  
3 tribal timber and logging operations on the Menominee  
4 Reservation."

5                                   EMERGENCY PER DIEM RATES

6           SEC. 606. From the date of the approval of this Act  
7 until the expiration of the six-month period immediately  
8 succeeding the termination of the present emergency as  
9 declared by the President, the Federal Security Adminis-  
10 trator, in prescribing per diem rates of allowance, not ex-  
11 ceeding \$8, in lieu of subsistence, for commissioned officers  
12 of the Public Health Service traveling on official business  
13 and away from their designated posts of duty, pursuant to  
14 the second paragraph of section 12 of the Pay Readjustment  
15 Act of 1942 (56 Stat. 364), is hereby authorized to pre-  
16 scribe such per diem rates of allowance, whether or not orders  
17 are given to such officers for travel to be performed repeat-  
18 edly between two or more places in the same vicinity, and  
19 without regard to the length of time away from their desig-  
20 nated posts of duty under such orders.

21                                   USE OF PUBLIC HEALTH SERVICE DURING PRESENT WAR

22           SEC. 607. If an Executive order is issued in accordance  
23 with the provisions of section 216 during the present war,  
24 service performed by any commissioned officer of the Service  
25 on or after December 7, 1941, and before the date of such

1 order shall be deemed, for purposes of compensation and other  
2 veterans' benefits, to have been performed by him as a mem-  
3 ber of the land or naval forces of the United States.

4 AMENDMENT TO SOLDIERS' AND SAILORS' CIVIL RELIEF ACT  
5 OF 1940

6 SEC. 608. (a) Section 101 (1) of the Soldiers' and  
7 Sailors' Civil Relief Act of 1940 (54 Stat. 1178), as  
8 amended, is hereby amended to read as follows:

9 “(1) The term ‘persons in military service’ and the term  
10 ‘persons in military service of the United States’, as used in  
11 this Act, shall include the following persons and no others:  
12 All members of the Army of the United States, the United  
13 States Navy, the Marine Corps, the Coast Guard, the  
14 Women’s Army Corps, and commissioned officers of the  
15 Public Health Service when declared by Executive order of  
16 the President to be in the military service. The term ‘mili-  
17 tary service’, as used in this Act, shall signify Federal service  
18 on active duty with any branch of service heretofore referred  
19 to or mentioned as well as training or education under the  
20 supervision of the United States preliminary to induction  
21 into the military service. The terms ‘active service’ or ‘active  
22 duty’ shall include the period during which a person in  
23 military service is absent from duty on account of sickness,  
24 wounds, leave, or other lawful cause.”

1       (b) Section 601 (1) of such Act, as amended, is hereby  
2 amended to read as follows:

3       “(1) In any proceeding under this Act a certificate  
4 signed by The Adjutant General of the Army as to persons  
5 in the Army or in any branch of the United States service  
6 while serving pursuant to law with the Army of the United  
7 States, signed by the Chief of the Bureau of Personnel of  
8 the Navy Department as to persons in the United States  
9 Navy or in any other branch of the United States service  
10 while serving pursuant to law with the United States Navy,  
11 signed by the Commandant, United States Marine Corps,  
12 as to persons in the Marine Corps, or in any other  
13 branch of the United States service while serving pur-  
14 suant to law with the Marine Corps, and signed by the  
15 Surgeon General as to commissioned officers of the Public  
16 Health Service on active duty when declared by Executive  
17 order of the President to be in the military service, or signed  
18 by an officer designated by any of them, respectively, for the  
19 purpose, shall when produced be prima facie evidence as  
20 to any of the following facts stated in such certificate:

21       “That a person named has not been, or is, or has been  
22 in military service; the time when and the place where such  
23 person entered military service, his residence at that time,  
24 and the rank, branch, and unit of such service that he entered,  
25 the dates within which he was in military service, the monthly



1 pay received by such person at the date of issuing the certifi-  
2 cate, the time when and the place where such person died  
3 in or was discharged from such service.”

4 REPEAL OF EXISTING LAW

5 SEC. 609. The following statutes and parts of statutes  
6 are hereby repealed:

7 Section 3657 in title XL, section 3689 in title XLI, and  
8 sections 4801, 4802, 4803, 4804, 4805, and 4806 in title  
9 LIX of the Revised Statutes of the United States;

10 The last paragraph under the heading “Miscellaneous”  
11 in chapter 130, 18 Statutes at Large 371, which paragraph  
12 is the seventh beginning on page 377;

13 Chapter 156, 18 Statutes at Large 485;

14 Chapter 202, 20 Statutes at Large 484;

15 Chapter 61, 21 Statutes at Large 46;

16 Section 1 and the final clause of section 2 (which reads  
17 as follows: “and the said quarantine stations when so estab-  
18 lished shall be conducted by the Marine Hospital Service  
19 under regulations framed in accordance with the Act of  
20 April twenty-ninth, eighteen hundred and seventy-eight”)  
21 of chapter 727, 25 Statutes at Large 355;

22 Chapter 19, 25 Statutes at Large 639;

23 Chapter 51, 26 Statutes at Large 31;

24 The last sentence of the paragraph headed “Office of the  
25 Supervising Surgeon General, Marine Hospital Service” in

1 chapter 541, 26 Statutes at Large 908, which appears at  
2 page 923 and reads as follows: "And hereafter, the Super-  
3 vising Surgeon General is hereby authorized to cause the  
4 detail of two surgeons and two passed assistant surgeons for  
5 duty in the Bureau, who shall each receive the pay and  
6 allowances of their respective grades in the general service.";

7 Chapter 114, 27 Statutes at Large 449;

8 The last sentence of the paragraph headed "Office of  
9 Supervising Surgeon General, Marine Hospital Service", in  
10 chapter 174, 28 Statutes at Large 162, which appears at  
11 page 179 and is as follows: "And hereafter the Supervising  
12 Surgeon General of the Marine Hospital Service is hereby  
13 authorized to cause the detail of an additional medical officer  
14 and one hospital steward for duty in the Bureau, who shall  
15 each receive the pay and allowances of his respective grade  
16 in the general service.";

17 Chapter 213, 28 Statutes at Large 229;

18 Chapter 300, 28 Statutes at Large 372;

19 The last sentence of the paragraph headed "Office of  
20 Supervising Surgeon General, Marine Hospital Service", in  
21 chapter 177, 28 Statutes at Large 764, which appears at  
22 page 780 and is as follows: "And hereafter the Supervising  
23 Surgeon General of the Marine Hospital Service is hereby  
24 authorized to cause the detail of two hospital attendants from  
25 the port of New York for duty in the laboratory of the

1 Bureau, and who shall each receive the pay equivalent to the  
2 compensation of a first-class hospital attendant.”;

3 The proviso at the end of the paragraph headed “Office  
4 of Supervising Surgeon General Marine Hospital Service” in  
5 chapter 265, 29 Statutes at Large 538, which appears at  
6 page 554 and is as follows: “*Provided*, That the Secretary of  
7 the Treasury is hereby authorized, in his discretion, to grant to  
8 the medical officers of the Marine Hospital Service commis-  
9 sioned by the President, without deduction of pay, leaves  
10 of absence for the same period of time and in the same man-  
11 ner as is now authorized to be granted to officers of the Army  
12 by the Secretary of War”;

13 Chapter 349, 30 Statutes at Large 976;

14 Section 10, chapter 191, 31 Statutes at Large 77;

15 The first paragraph of section 97 of chapter 339, 31  
16 Statutes at Large 141;

17 Chapter 836, 31 Statutes at Large 1086;

18 That portion of the third paragraph of section 84 of  
19 chapter 1369, 32 Statutes at Large 691 which appears on  
20 page 711 and reads as follows: “and the provisions of law  
21 relating to the public health and quarantine shall apply in  
22 the case of all vessels entering a port of the United States or  
23 its aforesaid possessions from said islands, where the customs  
24 officers at the port of departure shall perform the duties re-  
25 quired by such law of consular officers in foreign ports”;

1 Chapter 1370, 32 Statutes at Large 712;

2 Chapter 1378, 32 Statutes at Large 728;

3 Chapter 1443, 33 Statutes at Large 1009;

4 The last sentence of the last paragraph under the head  
5 "Public Health and Marine Hospital Service" in chapter  
6 1484, 33 Statutes at Large 1214, which appears at page  
7 1217 and is as follows: "And the Secretary of the Treasury  
8 shall, for the fiscal year nineteen hundred and seven, and  
9 annually thereafter, submit to Congress, in the regular Book  
10 of Estimates, detailed estimates of the expenses of maintain-  
11 ing the Public Health and Marine Hospital Service,";

12 Public Resolution Numbered 20, 33 Statutes at Large  
13 1283;

14 Chapter 3433, 34 Statutes at Large 299;

15 Section 17 of Chapter 1134, 34 Statutes at Large 898;

16 That portion of the third paragraph under the head  
17 "Back Pay and Bounty" in chapter 200, 35 Statutes at Large  
18 373, as amended by chapter 213, 52 Statutes at Large 352,  
19 which is at page 352 of 52 Statutes at Large and reads as  
20 follows: "and of deceased commissioned officers of the Public  
21 Health Service";

22 The proviso in the tenth paragraph under the head  
23 "Public Health and Marine Hospital Service" in chapter  
24 285, 36 Statutes at Large 1363, which appears in the eighth



1 paragraph on page 1394 and is as follows: "*Provided*, That  
2 there may be admitted into said hospitals, for study, persons  
3 with infectious or other diseases affecting the public health,  
4 and not to exceed ten cases in any one hospital at one time",  
5 and the substantially similar provisions appearing under the  
6 heading "Public Health and Marine Hospital Service" or  
7 the heading "Public Health Service" in the following stat-  
8 utes: Chapter 355, 37 Statutes at Large 417, at page 435;  
9 chapter 3, 38 Statutes at Large 4, at page 24; chapter 209,  
10 39 Statutes at Large 262, at page 278; chapter 28, 40  
11 Statutes at Large 459, at page 468; chapter 113, 40 Statutes  
12 at Large 634, at page 644; chapter 24, 41 Statutes at Large  
13 163, at page 175; chapter 288, 37 Statutes at Large 309;

14 The proviso at the end of the last paragraph under the  
15 head "Public Health Service" in chapter 149, 37 Statutes  
16 at Large 912, which appears at page 915 and is as follows:  
17 "*Provided*, That hereafter the director of the Hygienic Lab-  
18 oratory shall receive the pay and allowances of a senior  
19 surgeon";

20 That portion of the second paragraph under the head  
21 "Public Health Service" in chapter 3, 38 Statutes at Large  
22 4, which appears at page 23 and reads as follows: "at least  
23 six of the assistant surgeons provided for hereunder shall  
24 be required to have had a special training in the diagnosis of

1 insanity and mental defect for duty in connection with the  
2 examination of arriving aliens with special reference to the  
3 detection of mental defection;”;

4 The proviso at the end of the twelfth paragraph under  
5 the head “Public Health Service” in chapter 3, 38 Statutes  
6 at Large 4, which appears at page 24 and is as follows:  
7 “*Provided*, That hereafter commissioned officers and pharma-  
8 cists, and those employees of the Service devoting all their  
9 time to field work, shall be entitled to hospital relief when  
10 taken sick or injured in line of duty”;

11 The last clause of chapter 124, 38 Statutes at Large 387,  
12 which reads as follows: “and the said Secretary is hereby  
13 authorized to detail for duty on revenue cutters such sur-  
14 geons and other persons of the Public Health Service as he  
15 may deem necessary”;

16 Section 5 under the head “Nineteenth Lighthouse Dis-  
17 trict” in chapter 414, 39 Statutes at Large 536, at page 538;

18 Chapter 26, 39 Statutes at Large 872;

19 That portion of section 16 of chapter 29, 39 Statutes  
20 at Large 874, which appears at page 885 and reads as fol-  
21 lows: “who shall have had at least two years’ experience  
22 in the practice of their profession since receiving the degree of  
23 doctor of medicine, and”;

24 The sixth paragraph under the head “Public Health  
25 Service” in chapter 3, 40 Statutes at Large 2, at page 6;

1 The seventh paragraph under the head "Bureau of  
2 Mines" in chapter 27, 40 Statutes at Large 105, which is  
3 the third full paragraph appearing on page 146;

4 Chapter 37, 40 Statutes at Large 242;

5 The proviso in the fourth paragraph under the head  
6 "Public Health Service" in chapter 113, 40 Statutes at  
7 Large 634, which appears at page 644 and is as follows:  
8 "*Provided*, That the pay of attendants at marine hospitals,  
9 quarantine, and immigration stations, whose present com-  
10 pensation is less than the rate of \$1,200 per annum, may be  
11 increased to a rate not to exceed \$1,200 per annum";

12 The proviso in the eleventh paragraph under the head  
13 "Public Health Service" in chapter 113, 40 Statutes at  
14 Large 634, which appears at page 644 and is as follows:  
15 "*Provided*, That the Public Health Service, from and after  
16 July first, nineteen hundred and eighteen, shall pay to  
17 Saint Elizabeths Hospital the actual per capita cost of main-  
18 tenance in the said hospital of patients committed by that  
19 Service";

20 The sixtieth paragraph under the head "Bureau of  
21 Fisheries" in chapter 113, 40 Statutes at Large 634, which  
22 is the fourth full paragraph appearing on page 694;

23 Sections 1, 3, 4, 6, and 7 of chapter XV of chapter 143,  
24 40 Statutes at Large 845;

25 The thirteenth paragraph under the head "General

1 Expenses, Bureau of Chemistry" in chapter 178, 40 Statutes  
 2 at Large 973, which is the second full paragraph appearing  
 3 on page 992;

4 Section 2 of chapter 179, 40 Statutes at Large 1008;

5 Chapter 196, 40 Statutes at Large 1017;

6 Chapter 98, 40 Statutes at Large 1302;

7 The last paragraph under the head "Public Health  
 8 Service" in chapter 6, 41 Statutes at Large 35, which is the  
 9 sixth full paragraph appearing on page 45;

10 The proviso at the end of the first paragraph under the  
 11 head "Public Health Service" in chapter 94, 41 Statutes at  
 12 Large 503, which appears at page 507, and is as follows:  
 13 "*Provided*, That the Secretary of the Treasury is authorized  
 14 to make regulations governing the disposal of articles pro-  
 15 duced by patients in the course of their curative treatment,  
 16 either by allowing the patient to retain same or by selling  
 17 the articles and depositing the money received to the credit  
 18 of the appropriation from which the materials for making the  
 19 articles were purchased";

20 The second paragraph under the head "Public Health  
 21 Service" in chapter 94, 41 Statutes at Large 503, which is  
 22 the seventh full paragraph appearing on page 507;

23 The last paragraph under the head "Public Health  
 24 Service" in chapter 94, 41 Statutes at Large 503, which is  
 25 the seventh full paragraph appearing on page 508, and the



1 substantially similar provisions in chapter 161, 41 Statutes  
2 at Large 1367, at page 1378;

3 The fourth paragraph under the head "Quarantine Sta-  
4 tions" in chapter 235, 41 Statutes at Large 874, which is  
5 the eighth full paragraph appearing on page 875;

6 The third paragraph under the head "Public Health  
7 Service" in chapter 235, 41 Statutes at Large 874, which  
8 is the ninth full paragraph appearing on page 883;

9 Chapter 80, 41 Statutes at Large 1149;

10 The second paragraph under the head "Public Health  
11 Service" in chapter 23, 42 Statutes at Large 29, which is  
12 the thirteenth full paragraph appearing on page 38;

13 The proviso at the end of section 4 of chapter 57, 42  
14 Statutes at Large 147, which appears at page 148, and is  
15 as follows: "*Provided*, That all commissioned personnel  
16 detailed or hereafter detailed from the United States Public  
17 Health Service to the Veterans' Bureau, shall hold the same  
18 rank and grade, shall receive the same pay and allowances,  
19 and shall be subject to the same rules for relative rank and  
20 promotion as now or hereafter may be provided by law for  
21 commissioned personnel of the same rank or grade or per-  
22 forming the same or similar duties in the United States Pub-  
23 lic Health Service";

24 The ninth paragraph under the head "Bureau of Mines",  
25 in chapter 199, 42 Statutes at Large 552, which is the fourth

1 full paragraph on page 588, and the substantially similar  
2 provisions in chapter 42, 42 Statutes at Large 1174, at page  
3 1210; chapter 264, 43 Statutes at Large 390, at page 422;  
4 chapter 462, 43 Statutes at Large 1141, at page 1175;

5       The last sentence of the paragraph under the head  
6 “Public Health Service” in chapter 258, 42 Statutes at Large  
7 767, which appears at page 776 and is as follows: “The  
8 Immigration Service shall reimburse the Public Health Serv-  
9 ice on the basis of per capita rates fixed by the Secretary  
10 of the Treasury and the sums received by the Public Health  
11 Service from this source shall be covered into the Treasury  
12 as miscellaneous receipts”;

13       The first proviso at the end of the ninth paragraph under  
14 the head “Public Health Service” in chapter 84, 43 Statutes  
15 at Large 64, which appears at page 75 and is as follows:  
16 “*Provided*, That the Immigration Service shall permit the  
17 Public Health Service to use the hospitals at Ellis Island  
18 Immigration Station for the care of the Public Health Service  
19 patients, free of expense for physical upkeep, but with a  
20 charge of actual cost for fuel, light, water, telephone, and  
21 similar supplies and services, to be covered into the proper  
22 Immigration Service appropriations; and moneys collected  
23 by the Immigration Service on account of hospital expenses

1 of persons detained under the immigration laws and regula-  
2 tions at Ellis Island Immigration Station shall be covered  
3 into the Treasury as miscellaneous receipts:”,

4 and substantially similar provisions under the head “Public  
5 Health Service” in chapter 87, 43 Statutes at Large 763,  
6 at page 774; chapter 126, 45 Statutes at Large 162, at page  
7 174; chapter 39, 45 Statutes at Large 1028, at page 1039;  
8 chapter 289, 46 Statutes at Large 335, at page 347; chapter  
9 110, 49 Statutes at Large 218, at page 229; chapter 725,  
10 49 Statutes at Large 1827, at page 1839; chapter 180, 50  
11 Statutes at Large 137, at page 149; chapter 55, 52 Statutes  
12 at Large 120, at page 133; chapter 428, 54 Statutes at Large  
13 574, at page 585; chapter 269, 55 Statutes at Large 466, at  
14 page 481; and Public Law 647, Seventy-seventh Congress  
15 at page 22;

16 Chapter 146, 43 Statutes at Large 809;

17 The words “and public health” in the last sentence of  
18 section 7 (b) of chapter 344, 44 Statutes at Large 568;

19 The words “or public-health” wherever they appear in  
20 the second sentence of section 11 (b) of chapter 344, 44  
21 Statutes at Large 568, as amended;

22 Section 3 of chapter 371, 44 Statutes at Large 622;

23 Chapter 625, 45 Statutes at Large 603;

1       The proviso at the end of the fifth paragraph under the  
 2 head "Public Health Service" in chapter 39, 45 Statutes at  
 3 Large 1028, which appears at page 1039, and is as follows:  
 4 "*Provided*, That funds expendable for transportation and  
 5 traveling expenses may also be used for preparation for ship-  
 6 ment and transportation to their former homes of remains of  
 7 officers who die in line of duty",

8 and substantially similar provisions appearing under the  
 9 head "Public Health Service" in chapter 289, 46 Statutes at  
 10 Large 335, at page 346; chapter 110, 49 Statutes at Large  
 11 218, at page 228; chapter 180, 50 Statutes at Large 137, at  
 12 page 148; chapter 55, 52 Statutes at Large 120, at page 132;  
 13 chapter 428, 54 Statutes at Large 574, at page 584; chap-  
 14 ter 269, 55 Statutes at Large 466, at page 480;

15       Chapter 82, 45 Statutes at Large 1085;

16       The second paragraph under the head "Government in  
 17 the Territories" in chapter 707, 45 Statutes at Large 1623,  
 18 which is the seventh full paragraph on page 1644;

19       Chapter 125, 46 Statutes at Large 150;

20       Chapter 320, 46 Statutes at Large 379;

21       Section 4 of chapter 488, 46 Statutes at Large 585;

22       Chapter 597, 46 Statutes at Large 807;

23       Chapter 409, 46 Statutes at Large 1491;

24       Section 2 of chapter 656, 48 Statutes at Large 1116;

25       The ninth paragraph under the head "Public Health



1 Service" in chapter 110, 49 Statutes at Large 218, which is  
2 the second full paragraph appearing on page 229;

3 Title VI of chapter 531, 49 Statutes at Large 620;

4 Chapter 161, 49 Statutes at Large 1185;

5 That portion of chapter 550, 49 Statutes at Large 1514,  
6 which reads as follows: "or of the United States Public  
7 Health Service";

8 The proviso at the end of the thirteenth paragraph under  
9 the head "Public Health Service" in chapter 725, 49 Statutes  
10 at Large 1827, which appears at page 1840 and is as follows:  
11 "*Provided*, That on and after July 1, 1936, the Narcotic  
12 Farm at Lexington, Kentucky, shall be known as United  
13 States Public Health Service Hospital, Lexington, Kentucky,  
14 but such change in designation shall not affect the status  
15 of any person in connection therewith or the status of such  
16 institution under any Act applicable thereto";

17 The fourth paragraph under the head "Public Health  
18 Service" in chapter 180, 50 Statutes at Large 137, which is  
19 the sixth full paragraph on page 148;

20 Section 2 of chapter 545, 50 Statutes at Large 547;

21 Chapter 565, 50 Statutes at Large 559;

22 The first proviso in the paragraph headed "Division of  
23 Mental Hygiene" under the head "Public Health Service" in  
24 chapter 55, 52 Statutes at Large 120, which appears at page  
25 134 and is as follows: "*Provided*, That on and after July

1 1, 1938, the United States Narcotic Farm, Fort Worth,  
2 Texas, shall be known as United States Public Health Service  
3 Hospital of Fort Worth, Texas, but such change in desig-  
4 nation shall not affect the status of any person in connection  
5 therewith or the status of such institution under any Act  
6 applicable thereto:";

7 Chapter 267, 52 Statutes at Large 439;

8 Chapter 92, 53 Statutes at Large 620;

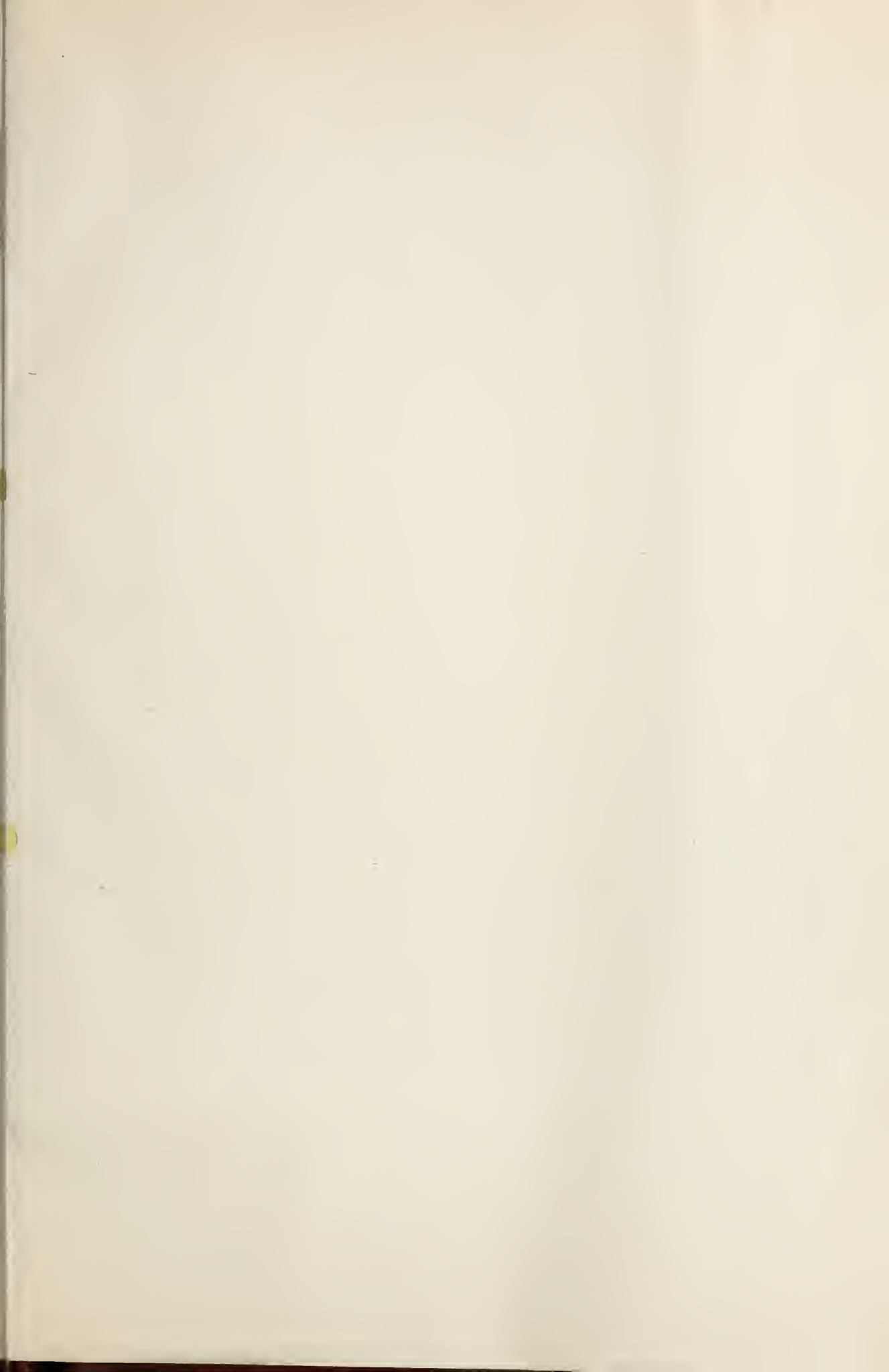
9 Chapter 606, 53 Statutes at Large 1266;

10 Chapter 636, 53 Statutes at Large 1338;

11 Section 509 of chapter 666, 53 Statutes at Large 1360;

12 Section 205 (b) of Reorganization Plan Numbered I,  
13 53 Statutes at Large 1423; and

14 Chapter 566, 54 Statutes at Large 747.



78<sup>TH</sup> CONGRESS  
1<sup>ST</sup> SESSION

H. R. 3379

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## A BILL

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To codify the laws relating to the Public  
Health Service, and for other purposes.

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By Mr. BULWINKLE

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OCTOBER 4, 1943  
Referred to the Committee on Interstate and Foreign  
Commerce





A. BULL

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Please return to  
LEGISLATIVE SERVICE SECTION  
Office of Budget and Finance  
[UNREVISED]

# **PUBLIC HEALTH SERVICE CODE**

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## **HEARING**

BEFORE A

### **SUBCOMMITTEE OF THE COMMITTEE ON INTERSTATE AND FOREIGN COMMERCE HOUSE OF REPRESENTATIVES**

SEVENTY-EIGHTH CONGRESS

SECOND SESSION

ON

## **H. R. 3379**

A BILL TO CODIFY THE LAWS RELATING TO THE  
PUBLIC HEALTH SERVICE, AND FOR  
OTHER PURPOSES

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MARCH 1, 2, 3, 7, 8, 9, 10, AND 14, 1944

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Printed for the use of the  
Committee on Interstate and Foreign Commerce



UNITED STATES  
GOVERNMENT PRINTING OFFICE  
WASHINGTON : 1944

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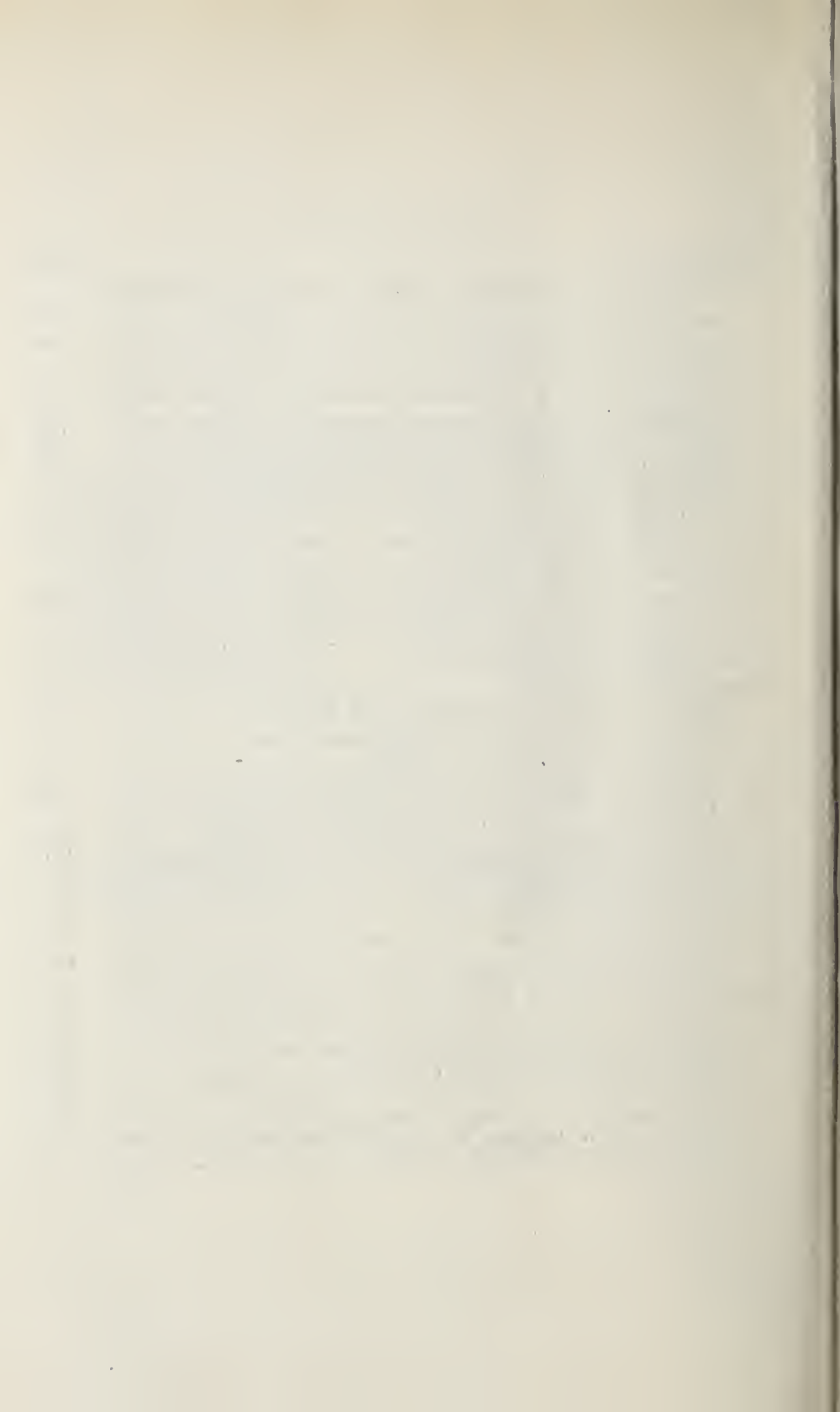
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# PUBLIC HEALTH SERVICE CODE

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WEDNESDAY, MARCH 1, 1944

HOUSE OF REPRESENTATIVES,  
SUBCOMMITTEE OF THE COMMITTEE ON  
INTERSTATE AND FOREIGN COMMERCE,  
Washington, D. C.

The subcommittee met at 10 a. m., in the committee's hearing room, New House Office Building, Hon. Alfred L. Bulwinkle presiding.

Mr. BULWINKLE. The committee will come to order. This subcommittee of the Committee on Interstate and Foreign Commerce has met today to consider H. R. 3379, a bill to codify the laws relating to the Public Health Service, and for other purposes.

(The bill referred to is as follows:)

[H. R. 3379, 78th Cong., 1st sess.]

A BILL To codify the laws relating to the Public Health Service, and for other purposes

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

## TITLE I—SHORT TITLE AND DEFINITIONS

### SHORT TITLE

SECTION 1. Titles I to V, inclusive, of this Act may be cited as the "Public Health Service Code."

### DEFINITIONS

SEC. 2. When used in this Act—

- (a) The term "Service" means the Public Health Service;
- (b) The term "Surgeon General" means the Surgeon General of the Public Health Service;
- (c) The term "Administrator" means the Federal Security Administrator;
- (d) The term "regulations," except when otherwise specified, means rules and regulations made by the Surgeon General with the approval of the Administrator;
- (e) The term "executive department" means any executive department, agency, or independent establishment of the United States or any corporation wholly owned by the United States;
- (f) The term "State" means a State or the District of Columbia, Hawaii, Alaska, Puerto Rico, or the Virgin Islands, except that as used in section 361 (d) such term means a State, the District of Columbia, or Alaska;
- (g) The term "possession" shall include, among other possessions, Puerto Rico and the Virgin Islands;
- (h) The term "seamen" includes any person employed on board primarily in the care, preservation, or navigation of any vessel, or in the service, on board, of those engaged in such care, preservation, or navigation;
- (i) The term "vessel" includes every description of watercraft or other artificial contrivance used, or capable of being used, as a means of transportation on water, exclusive of aircraft and amphibious contrivances;
- (j) The term "habit-forming narcotic drug" or "narcotic" means opium and coca leaves and the several alkaloids derived therefrom, the best known of these

alkaloids being morphia, heroin, and codeine, obtained from opium, and cocaine derived from the coca plant; all compounds, salts, preparations, or other derivatives obtained either from the raw material or from the various alkaloids; Indian hemp and its various derivatives, compounds, and preparations, and peyote in its various forms; and

(k) The term "addict" means any person who habitually uses any habit-forming narcotic drug so as to endanger the public morals, health, safety, or welfare, or who is or has been so far addicted to the use of such habit-forming narcotic drugs as to have lost the power of self-control with reference to his addiction.

## TITLE II—ADMINISTRATION

### PUBLIC HEALTH SERVICE

SEC. 201. The Public Health Service in the Federal Security Agency shall be administered by the Surgeon General under the supervision and direction of the Administrator.

#### ORGANIZATION

SEC. 202. The Service shall consist of (1) the Office of the Surgeon General, (2) the National Institute of Health, (3) the Bureau of Medical Services, and (4) the Bureau of State Services. The Surgeon General is authorized and directed to assign to the Office of the Surgeon General, to the National Institute of Health, to the Bureau of Medical Services, and to the Bureau of State Services, respectively, the several functions of the Service, and to establish within them such divisions, sections, and other units as he may find necessary; and from time to time abolish, transfer, and consolidate divisions, sections, and other units and assign their functions and personnel in such manner as he may find necessary for efficient operation of the Service. The Surgeon General may delegate to any officer or employee of the Service such of his powers and duties, hereinafter in this Act prescribed, except the making of regulations, as he may deem necessary or expedient.

#### COMMISSIONED CORPS

SEC. 203. The commissioned corps in the Service shall consist of commissioned officers of the Regular Corps and commissioned officers of the Reserve Corps. All such officers shall be citizens and shall be appointed without regard to the civil-service laws and compensated without regard to the Classification Act of 1923, as amended. Commissioned officers of the Reserve Corps shall be appointed by the President and commissioned officers of the Regular Corps shall be appointed by him by and with the advice and consent of the Senate. Commissioned officers of the Reserve Corps shall at all times be subject to call to active duty by the Surgeon General, including active duty for the purpose of training and active duty for the purpose of determining their fitness for appointment in the Regular Corps. All active service in the Reserve Corps, as well as service in the Regular Corps, shall be credited for the purpose of promotion in the Regular Corps.

#### SURGEON GENERAL

SEC. 204. The Surgeon General shall be appointed from the Regular Corps for a four-year term by the President by and with the advice and consent of the Senate. Upon the expiration of such term the Surgeon General, unless reappointed, shall revert to the grade and number in the Regular Corps that he would have occupied had he not served as Surgeon General.

#### DEPUTY SURGEON GENERAL AND ASSISTANT SURGEONS GENERAL

SEC. 205. (a) The Surgeon General shall assign one commissioned officer from the Regular Corps to administer the Office of the Surgeon General, to act as Surgeon General during the absence or disability of the Surgeon General or in the event of a vacancy in that office, and to perform such other duties as the Surgeon General may prescribe, and while so assigned he shall have the title of Deputy Surgeon General.

(b) The Surgeon General shall assign six commissioned officers from the Regular Corps to be, respectively, the Director of the National Institute of Health, the Chief of the Bureau of State Services, the Chief of the Bureau of Medical



Services, the Chief Medical Officer of the United States Coast Guard, the Chief Dental Officer of the Service, and the Chief Sanitary Engineering Officer of the Service, and while so serving they shall each have the title of Assistant Surgeon General.

(c) The Surgeon General shall designate the Assistant Surgeon General who shall serve as Surgeon General in case of absence or disability, or vacancy in the offices, of both the Surgeon General and the Deputy Surgeon General.

#### GRADES, RANKS, AND TITLES OF THE COMMISSIONED CORPS

SEC. 206. (a) The Surgeon General during the period of his appointment as such, shall be of the same grade, with the same pay and allowances, as the Surgeon General of the Regular Army of the United States; and the Deputy Surgeon General and Assistant Surgeons General, while assigned as such, shall have the grade corresponding with the grade of Brigadier General, with the same pay and allowances. The grades of commissioned officers of the Service shall correspond with grades of officers of the Regular Army of the United States as follows:

- (1) Officers of the director grade—colonel;
- (2) Officers of the senior grade—lieutenant colonel;
- (3) Officers of the full grade—major;
- (4) Officers of the passed assistant grade—captain;
- (5) Officers of the assistant grade—first lieutenant; and
- (6) Officers of the junior assistant grade—second lieutenant.

(b) The titles of medical officers of the foregoing grades shall be respectively (1) medical director, (2) senior surgeon, (3) surgeon, (4) passed assistant surgeon, (5) assistant surgeon, and (6) junior assistant surgeon. The President is authorized to prescribe titles, appropriate to the several grades, for commissioned officers of the Service other than medical officers. All titles of the officers of the Reserve Corps shall have the suffix "Reserve."

#### SPECIAL TEMPORARY POSITIONS

SEC. 207. (a) When necessary for the accomplishment of important temporary work, the President may establish special temporary positions in the Service and prescribe grades which shall be applicable to officers during periods they are assigned to such positions. While assigned to any such position an officer shall receive the pay and allowances applicable to the grade so prescribed. Not more than three such positions existing at any one time shall have the grade of Assistant Surgeon General. The Surgeon General shall assign commissioned officers to such positions.

(b) Commissioned officers and qualified technical or professional noncommissioned personnel may be assigned by the Surgeon General to be chiefs of administrative units. Such assignments shall not affect the pay of commissioned officers so assigned, except that when any commissioned officer below the grade of director is assigned to serve as chief of a division such officer during the period so assigned shall have the temporary grade and receive the pay and allowances applicable to the director grade.

#### APPOINTMENT OF PERSONNEL

SEC. 208. (a) (1) Except as provided in subsection (b) of this section, original appointments to the Regular Corps may be made only in the junior assistant, assistant, and passed assistant grades and original appointments to a grade above junior assistant shall be made only after passage of an examination (given in accordance with regulations of the President) in one or more of the several branches of medicine, surgery, dentistry, hygiene, sanitary engineering, pharmacy, or other specialties related to public health.

(2) Original appointments to the Reserve Corps may be made to any grade up to and including the director grade but only after passage of an examination (as prescribed by regulations). Reserve commissions shall be for a period of not more than five years and any such commission may be terminated by the President at any time, in his discretion.

(b) Whenever commissioned officers of the Service are not available for the performance of duties requiring highly specialized training and experience, the Administrator on recommendation of the Surgeon General shall report that fact

to the President and the President is authorized to appoint, by and with the advice and consent of the Senate, not to exceed three persons in any one fiscal year to grades in the Regular Corps of the Service above that of passed assistant, but not to a grade above that of director; and for purposes of pay and pay period any person appointed under the provisions of this section shall be considered as having had on the date of appointment service equal to that of the junior officer of the grade to which appointed.

(c) Pursuant to regulations, special consultants may be employed to assist and advise in the operation of the Service. Such consultants may be appointed without regard to the civil-service laws and their compensation may be fixed without regard to the Classification Act of 1923, as amended.

(d) Pursuant to regulations individual scientists, other than commissioned officers of the Service, may be designated by the Surgeon General to receive fellowships, appointed for duty with the Service without regard to the civil-service laws and compensated without regard to the Classification Act of 1923, as amended, may hold their fellowships under conditions prescribed therein, and may be assigned for studies or investigations either in this country or abroad during the terms of their fellowships.

(e) The appointment of any officer or employee of the Service made in accordance with the civil-service laws may be made effective as of the date on which such officer or employee enters upon duty.

#### PAY AND ALLOWANCES

SEC. 209. (a) Commissioned officers of the Regular Corps shall receive such pay and allowances as are or may hereafter be provided by law.

(b) Reserve officers shall receive the same pay and allowances when on active duty as commissioned officers of the Regular Corps, including allowances for travel and transportation of household goods and effects.

(c) In accordance with regulations commissioned officers of the Regular Corps and officers of the Reserve on active duty may make allotments from their pay and may be granted leaves of absence without any deduction from their pay. Such officers shall also be permitted to purchase quartermaster supplies from the Army, Navy, and Marine Corps at the same price as is charged officers of the Army, Navy, and Marine Corps.

(d) Female commissioned officers of the Service shall receive the same pay and allowances as male officers of corresponding grades, including allowances for dependents, except that no allowance shall be paid to any female commissioned officer on account of any dependent who is not in fact dependent upon such officer for his or her chief support. For the purposes of this subsection the term "dependent" shall include a husband, father, mother, and unmarried children (including stepchildren and adopted children) under twenty-one years of age.

(e) Members of the National Advisory Health Council and members of the National Advisory Cancer Council, other than ex officio members, while attending conferences or meetings of their respective Councils or while otherwise serving at the request of the Surgeon General, shall be entitled to receive compensation at a rate to be fixed by the Administrator, but not exceeding \$25 per diem, together with an allowance for actual and necessary traveling and subsistence expenses while so serving away from their places of residence.

(f) Field employees of the Service, except those employed on a per diem or fee basis, who render part-time duty and are also subject to call at any time for services not contemplated in their regular part-time employment, may be paid annual compensation for such part-time duty and, in addition, such fees for such other services as the Surgeon General may determine; but in no case shall the total paid to any such employee for any fiscal year exceed the amount of the minimum annual salary rate of the classification grade of the employee.

(g) Whenever any commissioned or other officer or employee of the Service is assigned for duty which the Surgeon General finds requires intimate contact with persons afflicted with leprosy, he may receive, as provided by regulations of the President, in addition to the pay and any allowance, if any, of his grade, not more than one-half the pay of such grade, and allowances or increased allowances.

(h) Individuals appointed under section 208 (d) shall have included in their fellowships such stipends or allowances (including travel and subsistence expenses) as the Surgeon General may deem necessary to procure qualified fellows.

## PROMOTIONS AND SEPARATION OF COMMISSIONED OFFICERS IN THE REGULAR CORPS

SEC. 210. (a) Promotions of commissioned officers of the Regular Corps to any grade up to and including the director grade shall be made only after examination given in accordance with regulations of the President and shall be made according to the same length of service as is now or may hereafter be prescribed for promotion of officers of corresponding grades of the Medical Corps of the Army, except that—

(1) In time of war or national emergency proclaimed by the President, any commissioned officer of the Regular Corps may be appointed to a higher temporary grade with the pay and allowances thereof without examination and without vacating his permanent appointment;

(2) For purposes of promotion, an officer whose initial appointment to the Regular Corps was above the assistant grade shall be considered as having had on the date of such initial appointment service equal to that of the junior officer of the grade to which he was appointed, except that if his active commissioned service in the Service exceeds that of the junior officer of the grade, such service (not exceeding ten years for an officer appointed in the passed assistant grade and fourteen years for an officer appointed in the full grade) shall be credited for purposes of promotion; and

(3) Officers commissioned in the grade of junior assistant shall be examined for promotion after not more than two years of service and if qualified shall be promoted to the next higher grade.

(b) At the end of his first three years of service, the record of each commissioned officer in the Regular Corps initially appointed in or above the grade of passed assistant shall be reviewed in accordance with regulations of the President and if found not fully qualified for further service he shall be separated from the Service and paid six months' pay and allowances.

(c) When a commissioned officer in the Regular Corps is found, after examination, to be not qualified for promotion for reasons other than physical disability incurred in line of duty—

(1) If below the full grade he shall be separated from the Service, and if in the assistant grade he shall be separated and paid six months' pay and allowances, and if in the passed assistant grade he shall be separated and paid one year's pay and allowances; and

(2) If in the full or senior grade he shall be reported as not in line of promotion, or shall be retired and paid at the rate of  $2\frac{1}{2}$  per centum for each complete year of active commissioned service in the Service, but in no case to exceed 60 per centum of his active pay at the time he is retired.

## PROMOTIONS OF OFFICERS OF THE RESERVE CORPS

SEC. 211. Officers of the Reserve Corps shall be promoted as provided in regulations prescribed by the President and shall be eligible for appointment to higher temporary grades in time of war or national emergency proclaimed by the President.

## RETIREMENT OF COMMISSIONED OFFICERS

SEC. 212. (a) Commissioned officers retired for disability incurred in line of duty shall be entitled to receive 75 per centum of their active pay at the time of retirement, except that any officer so retired who at the time of his initial appointment was more than forty-five years of age and any officer of the Reserve Corps shall be entitled to receive pay only at the rate of 4 per centum of active pay at the time of retirement for each twelve months of active commissioned service in the Army, Navy, Coast Guard, or Public Health Service, the total to be not more than 75 per centum of such pay.

(b) A commissioned officer of the Public Health Service on active duty shall be retired on the 1st day of the month immediately following his sixty-fourth birthday. Any such officer, if he (1) is a member of the Regular Corps, or (2) has had a total of twenty years' active commissioned service, including any commissioned service in the Army, Navy, or Coast Guard, shall be retired at the same rate of pay he would have received under subsection (a) if on the same date he had been retired because of disability incurred in line of duty.



## SIX MONTHS' PAY ON DEATH

SEC. 213. Upon official notification of the death occurring after December 6, 1941, from injury or disease, not the result of his or her own misconduct, of any commissioned officer of the Service on active duty, the Surgeon General shall cause to be paid from funds available for the pay of commissioned officers of the Service to the surviving spouse, or if there be none to the child or children (as defined by regulations), an amount equal to six months' pay at the rate received by such officer at the time of his or her death. If there be none of the foregoing relatives, the Surgeon General shall cause such amount to be paid to any other dependent relative of such commissioned officer, previously designated by such officer in accordance with regulations, or, in the absence of such designation, to any one or more of the grandparents, parents, sisters, and brothers determined by the Surgeon General to have been dependent upon such officer prior to his or her death, and such determination shall be final and conclusive upon the accounting officers of the Government. Payments under this section shall be in addition to all other benefits otherwise provided by law and the provision of section 7 of the Act of September 7, 1916, as amended (U. S. C., title 5, sec. 757) shall not be applicable to such payments.

## DETAIL OF PERSONNEL

SEC. 214. (a) The Administrator is authorized, upon the request of the head of an executive department, to detail officers or employees of the Service to such department for duty as agreed upon by the Administrator and the head of such department in order to cooperate in, or conduct work related to, the functions of such department or of the Service. When officers or employees are so detailed their salaries and allowances may be paid from working funds established as provided by law or may be paid by the Service from applicable appropriations and reimbursement may be made as agreed upon by the Administrator and the head of the executive department concerned.

(b) Upon the request of any State, or political subdivision thereof, personnel of the Service may be detailed by the Surgeon General for the purpose of assisting such State or political subdivision in work related to the functions of the Service.

(c) The Surgeon General may detail personnel of the Service to nonprofit educational, research, or other institutions engaged in health activities for special studies of scientific problems and for instruction of students and the dissemination of information relating to public health.

(d) Personnel detailed under subsections (b) and (c) shall be paid from applicable appropriations of the Service, except that, in accordance with regulations such personnel may be placed on leave without pay and paid by the State, subdivision, or institution to which they are detailed; but in any case their services while so detailed shall be considered as having been performed in the Service for purposes of longevity pay and promotion.

## REGULATIONS

SEC. 215. (a) The President shall from time to time prescribe regulations with respect to the appointment, promotion, retirement, termination of commission, titles, pay, uniforms, allowances (including allowances for uniforms and increased allowances for foreign service), and discipline of the commissioned corps of the Service.

(b) The Surgeon General, with the approval of the Administrator, unless specifically otherwise provided, shall promulgate all other regulations necessary to the administration of the Service, including regulations with respect to travel, transportation of household goods and effects, allotments from their pay by commissioned officers, and uniforms for employees.

(c) No regulation relating to qualifications for appointment of medical officers or employees shall give preference to any school of medicine.

## USE OF SERVICE IN EMERGENCY

SEC. 216. In time of actual war or emergency proclaimed by the President, he may utilize the Service to such extent and in such manner as shall in his judgment promote the public interest, and he may by Executive order declare the commissioned corps of the Service to be a military service. Upon such declaration, and during the period of such war or emergency or such part thereof as



the President shall prescribe, the commissioned corps (1) shall constitute a branch of the land and naval forces of the United States (and service in such corps during such period or part thereof shall be active military service), and (2) to the extent prescribed by regulations of the President, shall be subject to the Articles of War and to the Articles for the Government of the Navy: *Provided*, That during such period or part thereof the commissioned corps shall continue to operate as part of the Service except to the extent that the President may direct as Commander in Chief.

#### NATIONAL ADVISORY HEALTH AND CANCER COUNCILS

SEC. 217. (a) The National Advisory Health Council shall consist of 14 members. The Director of the National Institution of Health, and three experts, one each from the Army, the Navy, and the Bureau of Animal Industry, to be detailed by the Secretary of War, the Secretary of the Navy, and the Secretary of Agriculture, respectively, shall be ex officio members of the Council. The Surgeon General, with the approval of the Administrator, shall appoint, without regard to the civil-service laws, ten members of the Council who shall be persons, not otherwise in the employ of the United States, skilled in the sciences related to health. Each appointed member shall hold office for a term of five years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term. An appointed member shall not be eligible to serve continuously for more than five years but shall be eligible for reappointment if he has not served immediately preceding his reappointment.

(b) The National Advisory Health Council shall advise, consult with, and make recommendations to, the Surgeon General on matters relating to health activities and functions of the Service. The Surgeon General is authorized to utilize the services of any member or members of the Council, and where appropriate, any member or members of the National Advisory Cancer Council in connection with matters related to the work of the Service, for such periods, in addition to conference periods, as he may determine.

(c) The National Advisory Cancer Council shall consist of the Surgeon General ex officio, who shall be Chairman, and of six members to be appointed without regard to the civil-service laws by the Surgeon General with the approval of the Administrator. The six appointed members shall be selected from leading medical or scientific authorities who are outstanding in the study, diagnosis, or treatment of cancer. Each appointed member shall hold office for a term of three years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term. An appointed member shall not be eligible to serve continuously for more than three years but shall be eligible for reappointment if he has not served immediately preceding his reappointment.

### TITLE III—GENERAL POWERS AND DUTIES OF PUBLIC HEALTH

#### PART A—RESEARCH AND INVESTIGATIONS

##### IN GENERAL

SEC. 301. The Surgeon General shall conduct in the Service, and encourage, cooperate with, and render assistance to other appropriate public authorities, scientific institutions, and scientists in the conduct of, and promote the coordination of, research, investigations, experiments, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases, defects and injuries of man, including environmental sanitation, industrial hygiene, water purification, sewage treatment and pollution of lakes and streams. In carrying out the foregoing the Surgeon General is authorized to—

(a) Collect and make available through publications and other appropriate means, information as to, and the practical application of, such research and other activities;

(b) Make available facilities of the Service to appropriate public authorities, and to health officials and scientists engaged in special study;

(c) Establish and maintain research fellowships in the Service with such stipends and allowances (including traveling and subsistence expenses) as

he may deem necessary to procure the assistance of the most brilliant and promising research fellows from the United States and abroad;

(d) Make grants in aid to universities, hospitals, laboratories, and other public or private institutions, and to individuals for such research projects as are recommended by the National Advisory Health Council (or, with respect to cancer, recommended by the National Advisory Cancer Council);

(e) Secure from time to time and for such periods as he deems advisable, the assistance and advice of experts, scholars, and consultants from the United States or abroad;

(f) Admit and treat persons at institutions, hospitals, and stations of the Service; and

(g) Adopt, upon recommendation of the National Advisory Health Council (or, with respect to cancer, upon recommendation of the National Advisory Cancer Council), such additional means as he deems necessary or appropriate to carry out the purposes of this section.

#### NARCOTICS

SEC. 302. (a) In carrying out the purposes of section 301 with respect to narcotics, the studies and investigations shall include the use and misuse of narcotic drugs, the quantities of crude opium, coca leaves, and their salts, derivatives, and preparations, together with reserves thereof, necessary to supply the normal emergency medicinal and scientific requirements of the United States. The results of studies and investigations of the quantities of crude opium, coca leaves, or other narcotic drugs, together with such reserves thereof, as are necessary to supply the normal and emergency medicinal and scientific requirements of the United States, shall be reported not later than the 1st day of September each year to the Commissioner of Narcotics, to be used at his discretion in determining the amounts of crude opium and coca leaves to be imported under the Narcotic Drugs Import and Export Act, as amended.

(b) The Surgeon General shall cooperate with States for the purpose of aiding them to solve their narcotic drug problems and shall give authorized representatives of the States the benefit of his experience in the care, treatment, and rehabilitation of narcotic addicts to the end that each State may be encouraged to provide adequate facilities and methods for the care and treatment of its narcotic addicts.

#### PART B—FEDERAL-STATE COOPERATION

##### IN GENERAL

SEC. 311. The Surgeon General is authorized to accept from State and local authorities any assistance in the enforcement of quarantine regulations made pursuant to this Act which such authorities may be able and willing to provide. The Surgeon General shall also assist States and their political subdivisions in the prevention and suppression of communicable diseases, shall cooperate with and aid State and local authorities in the enforcement of their quarantine and other health regulations and in carrying out the purposes specified in section 314, and shall advise the several States on matters relating to the preservation and improvement of the public health.

##### HEALTH CONFERENCES

SEC. 312. A conference of the health authorities of the several States shall be called annually by the Surgeon General. Whenever in his opinion the interests of the public health would be promoted by a conference, the Surgeon General may invite as many of such health authorities to confer as he deems necessary or proper. Upon the application of health authorities of five or more States it shall be the duty of the Surgeon General to call a conference of all State and Territorial health authorities joining in the request. Each State represented at any conference shall be entitled to a single vote.

##### COLLECTION OF VITAL STATISTICS

SEC. 313. To secure uniformity in the registration of mortality, morbidity, and vital statistics the Surgeon General shall prepare and distribute suitable and necessary forms for the collection and compilation of such statistics which shall be published as a part of the health reports published by the Surgeon General.

## GRANTS AND SERVICES TO STATES

SEC. 314. (a) To enable the Surgeon General to carry out the purposes of section 301 with respect to developing more effective measures for the prevention, treatment, and control of venereal diseases, and to assist, through grants and as otherwise provided in this section, States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate measures for the prevention, treatment, and control of such diseases, including the training of personnel for State and local health work, and to enable him to (1) prevent and control the spread of the venereal diseases in interstate traffic; (2) conduct health and sanitation activities to prevent the spread of venereal diseases in (A) areas adjoining military and naval reservations, (B) areas where there are concentrations of military and naval forces, and (C) areas adjoining Government and private industrial plants engaged in defense work; and (3) meet the cost of pay, allowances, and traveling expenses of commissioned officers and other personnel of the Service detailed to assist in carrying out the purposes of this section with respect to the venereal diseases, and for the administration of this section with respect to such diseases, there is hereby authorized to be appropriated for each fiscal year a sum sufficient to carry out the purposes of this subsection.

(b) To enable the Surgeon General to assist, through grants and as otherwise provided in this section, States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate public health services, including demonstrations and including the training of personnel for State and local health work, and to enable him to (1) prevent and control the spread of communicable diseases in interstate traffic; (2) conduct health and sanitation activities in (A) areas adjoining military and naval reservations, (B) areas where there are concentrations of military and naval forces; (C) areas adjoining Government and private industrial plants engaged in defense work; and (D) Government and private industrial plants engaged in defense work; and (3) meet the cost of pay, allowances, and traveling expenses of commissioned officers and other personnel of the Service detailed to assist States in carrying out the purposes of this section, and for the administration of this section, there is hereby authorized to be appropriated for each fiscal year a sum sufficient to carry out the purposes of this subsection.

(c) For each fiscal year, the Surgeon General, with the approval of the Administrator, shall determine the total sum from the appropriation under subsection (a) and the total sum from the appropriation under subsection (b) which shall be available for allotment among the several States. He shall, in accordance with regulations, from time to time make allotments from such sums to the several States on the basis of (1) the population, (2) the size of the venereal-disease problem and the size of other special health problems, respectively, and (3) the financial need of the respective States. Upon making such allotments the Surgeon General shall notify the Secretary of the Treasury of the amounts thereof.

(d) The Surgeon General, with the approval of the Administrator, shall from time to time determine the amounts to be paid to each State from the allotments to such State, and shall certify to the Secretary of the Treasury, the amounts so determined, reduced or increased, as the case may be, by the amounts by which he finds, that estimates of required expenditures with respect to any prior period were greater or less than the actual expenditures for such period. Upon receipt of such certification, the Secretary of the Treasury shall, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay in accordance with certification.

(e) The moneys so paid to any State shall be expended solely in carrying out the purposes specified in subsection (a) or subsection (b) of this section, as the case may be, and in accordance with plans presented by the health authority of such State and approved by the Surgeon General.

(f) Money so paid shall be paid upon the condition that there shall be spent in such State for the same general purpose from funds of such State and its political subdivisions an amount determined in accordance with regulations.

(g) Whenever the Surgeon General, after reasonable notice and opportunity for hearing to the health authority of the State, finds that, with respect to money paid to the State out of appropriation under subsection (a) or subsection (b), as the case may be, there is a failure to comply substantially with either—

- (1) the provisions of this section;
- (2) the plan submitted under subsection (e); or
- (3) the regulations;



the Surgeon General shall notify such State health authority either that further payments will not be made to the State from appropriations under such subsection (or in his discretion that further payments will not be made to the State from such appropriations for activities in which there is such failure), until he is satisfied that there will no longer be any such failure. Until he is so satisfied the Surgeon General shall make no further certification for payment to such State (or limit payment to activities in which there is no such failure), from appropriations under such subsection.

(h) All regulations and amendments thereto with respect to grants to states under this section shall be made after consultation with a conference of the State health authorities.

(i) Funds appropriated under subsection (a) or (b) of this section, in addition to being available for payments to States, shall also be available for expenditure by the Surgeon General in otherwise carrying out such subsection, including expenditures for printing and binding of the findings of investigations, and for pay and allowances and traveling expenses of personnel of the Service engaged in activities authorized by such subsection.

#### HEALTH EDUCATION AND INFORMATION

SEC. 315. From time to time the Surgeon General shall issue information related to public health, in the form of publications or otherwise, for the use of the public, and shall publish weekly reports of health conditions in the United States and other countries and other pertinent health information for the use of persons and institutions engaged in work related to the functions of the Service.

#### PART C—HOSPITALS, MEDICAL EXAMINATIONS, AND MEDICAL CARE

##### HOSPITALS

SEC. 321. The Surgeon General, pursuant to regulations shall—

(a) Control, manage, and operate all institutions, hospitals, and stations of the Service, and provide for the care and treatment of patients, including the furnishing of prosthetic and orthopedic devices;

(b) Provide for the transfer of Public Health Service patients (in the care of attendants where necessary) between hospitals and stations operated by the Service or between such hospitals and stations and other hospitals and stations in which Public Health Service patients may be received, and the payment of expenses of such transfer;

(c) Provide for the disposal of articles produced by patients in the course of their curative treatment, either by allowing the patient to retain such articles or by selling them and depositing the money received therefor to the credit of the appropriation from which the materials for making the articles were purchased; and

(d) Provide for the disposal of money and effects, in the custody of the hospitals or stations, of deceased patients.

##### CARE AND TREATMENT OF SEAMEN AND CERTAIN OTHER PERSONS

SEC. 322. (a) The following persons shall be entitled in accordance with regulations, to medical, surgical, and dental treatment and hospitalization without charge at hospitals and other stations of the Service:

(1) Seamen employed on vessels of the United States registered, enrolled, and licensed under the maritime laws thereof, other than canal boats engaged in the coasting trade;

(2) Seamen employed on United States or foreign flag vessels as employees of the United States through the War Shipping Administration;

(3) Seamen, not enlisted or commissioned in the military or naval establishments, who are employed on State school ships or on vessels of the United States Government (other than those of the Panama Canal) of more than five tons' burden;

(4) Cadets on State school ships;

(5) Seamen on vessels of the Mississippi River Commission and, upon application of their commanding officers, officers and crews of vessels of the Fish and Wildlife Service;

(6) Enrollees in the United States Maritime Service on active duty and members of the Merchant Marine Cadet Corps; and



(7) Employees and noncommissioned officers of the Public Health Service when injured or taken sick in line of duty.

(b) When suitable accommodations are available, seamen on foreign-flag vessels may be given medical, surgical, and dental treatment and hospitalization on application of the master, owner, or agent of the vessel at hospitals and other stations of the Service at rates fixed by regulations. All expenses connected with such treatment, including burial in the event of death, shall be paid by such master, owner, or agent. No such vessel shall be granted clearance until such expenses are paid or their payment appropriately guaranteed to the Collector of Customs.

(c) Seamen on foreign-flag vessels, and any person when detained in accordance with quarantine or immigration laws or regulations, may be treated and cared for by the Service.

(d) Persons not entitled to treatment and care at institutions, hospitals, and stations of the Service may, in accordance with regulations of the Surgeon General, be admitted thereto for temporary treatment and care in case of emergency.

(e) Persons entitled to care and treatment under subsection (a) of this section may, in accordance with regulations receive such care and treatment at the expense of the Service from public or private medical or hospital facilities other than those of the Service, when authorized by the officer in charge of the station at which the application is made.

#### CARE AND TREATMENT OF FEDERAL PRISONERS

SEC. 323. The Service shall supervise and furnish medical treatment and other necessary medical, psychiatric, and related technical and scientific services, authorized by the Act of May 13, 1930, as amended (U. S. C., title 18, sections 751, 752), in Federal penal and correctional institutions of the United States.

#### EXAMINATION AND TREATMENT OF FEDERAL EMPLOYEES

SEC. 324. The Surgeon General is authorized to provide at institutions, hospitals, and stations of the Service medical, surgical, and hospital services and supplies for civilian employees entitled to treatment under the United States Employees' Compensation Act. The Surgeon General may also provide for making medical examinations of—

(a) employees of the Alaska Railroad and employees of the Federal Government for retirement purposes;

(b) employees in the Federal classified service as requested by the Civil Service Commission for the purpose of promoting health and efficiency and minimizing accidents among Federal employees; and

(c) seamen for purposes of qualifying for certificates of service.

#### EXAMINATION OF ALIENS

SEC. 325. The Surgeon General shall provide for making such physical and mental examinations of arriving aliens as are required by the immigration laws, subject to administrative regulations prescribed by the Attorney General and medical regulations prescribed by the Surgeon General with the approval of the Administrator.

#### COAST GUARD, COAST AND GEODETIC SURVEY, AND PUBLIC HEALTH SERVICE

SEC. 326. (a) Pursuant to regulations approved by the President (1) all commissioned officers, chief warrant officers, warrant officers, cadets, and enlisted personnel of the Coast Guard and Coast and Geodetic Survey, including those on shore duty and those on detached duty, whether on active duty or retired; (2) commissioned officers of the Service, whether on active duty or retired; (3) the officers and members of the crews of vessels of the Coast Guard and the Coast and Geodetic Survey, whether on active duty or retired; (4) civilian keepers and assistant keepers in the Coast Guard, whether on active duty or retired; and (5) retired officers and employees of the former Lighthouse Service shall be entitled to medical, surgical, and dental treatment and hospitalization (including the furnishing of supplies and prosthetic and orthopedic appliances incident thereto) by the Service.

(b) The dependent members of families of commissioned officers of the Service and of officers and enlisted personnel of the Coast Guard and the Coast and Geodetic Survey shall be furnished medical advice and out-patient treatment

by the Service at its hospitals and relief stations and they shall also be furnished hospitalization at hospitals of the Service, if suitable accommodations are available, at a per diem cost to the officer or enlisted person concerned. Such cost shall be equivalent to the uniform per diem reimbursement rate, approved by the President for Government hospitals for the fiscal year in which such hospitalization is furnished.

(c) The Service shall provide all services referred to in subsection (a) required by the Coast Guard and shall perform all necessary duties prescribed by statute in connection with the examinations to determine physical or mental condition for purposes of appointment, enlistment, and reenlistment, promotion, and retirement, and officers of the Service assigned to duty on Coast Guard vessels may extend aid to the crews of American vessels engaged in deep-sea fishing.

#### PART D—LEPERS

##### RECEIPT OF LEPERS

SEC. 331. The Service shall, in accordance with regulations, receive into any hospital of the Service suitable for his accommodation any person afflicted with leprosy who presents himself for care, detention, or treatment, or who may be apprehended under sections 332 or 361 of this Act, and any person afflicted with leprosy duly consigned to the care of the Service by the proper health authority of any State, Territory, or the District of Columbia. The Surgeon General is authorized, upon the request of any health authority, to send for any person within the jurisdiction of such authority who is afflicted with leprosy and to convey such person to the appropriate hospital for detention and treatment. When the transportation of any such person is undertaken for the protection of the public health the expense of such removal shall be met from funds available for the maintenance of hospitals of the Service.

##### APPREHENSION, DETENTION, TREATMENT, AND RELEASE

SEC. 332. The Surgeon General may provide by regulation for the apprehension, detention, treatment, and release of persons being treated by the Service for leprosy.

#### PART E—NARCOTICS ADDICTS

##### CARE AND TREATMENT

SEC. 341. The Surgeon General is authorized to provide for the confinement, care, prection, treatment, including the furnishing of prosthetic and orthopedic appliances, and discipline of persons addicted to the use of habit-forming narcotic drugs who voluntarily submit themselves for treatment and addicts who have been or are hereafter convicted of offenses against the United States, including persons convicted by general courts martial and consular courts. Such care and treatment shall be provided at hospitals of the Service especially equipped for the accommodation of such patients and shall be designed to rehabilitate such persons, to restore them to health, and, where necessary, to train them to be self-supporting and self-reliant.

##### EMPLOYMENT OF ADDICTS

SEC. 342. Narcotic addicts in hospitals of the Service designated for their care shall be employed in such manner and under such conditions as the Surgeon General may direct. In such hospitals the Surgeon General may, in his discretion, establish industries, plants, factories, or shops for the production and manufacture of articles, commodities, and supplies for the United States Government. The Secretary of the Treasury may require any Government department, establishment or other institution, for whom appropriations are made directly or indirectly by the Congress of the United States, to purchase at current market prices, as determined by him or his authorized representative, such of the articles, commodities, or supplies so produced or manufactured as meet their specifications; and the Surgeon General shall provide for payment to the inmates of their dependents of such pecuniary earnings as he may deem proper. The Administrator shall establish a working-capital fund for such industries, plants, factories, and shops out of any funds appropriated for Public Health Service hospitals at which addicts are treated and cared for; and such fund shall available for the

purchase, repair, or replacement of machinery or equipment, for the purchase of raw materials and supplies, for the purchase of uniforms and other distinctive wearing apparel of employees in the performance of their official duties, and for the employment of necessary civilian officers and employees. The Surgeon General may provide for the disposal of byproducts of the industrial activities conducted pursuant to this section, and the proceeds of any sales thereof shall be covered into the Treasury of the United States to the credit of the working-capital fund.

## CONVICTS

SEC. 343. (a) The authority vested with the power to designate the place of confinement of a prisoner shall transfer to hospitals of the Service especially equipped for the accommodation of addicts, if accommodations are available, all addicts who have been or are hereafter sentenced to confinement, or who are now or shall hereafter be confined, in any penal, correctional, disciplinary, or reformatory institution of the United States, including those addicts convicted of offenses against the United States who are confined in State and Territorial prisons, penitentiaries, and reformatories, except that no addict shall be transferred to a hospital of the Service who, in the opinion of the officer authorized to direct the transfer, is not a proper subject for confinement in such an institution either because of the nature of the crime he has committed or because of his apparent incorrigibility. The authority vested with the power to designate the place of confinement of a prisoner shall transfer from a hospital of the Service to the institution from which he was received, or to such other institution as may be designated by the proper authority, any addict whose presence at a hospital of the Service is detrimental to the well-being of the hospital or who does not continue to be a narcotic addict. All transfers of such prisoners to or from a hospital of the Service shall be accompanied by necessary attendants as directed by the officer in charge of such hospital and the actual and necessary expenses incident to such transfers shall be paid from the appropriation for the maintenance of such Service hospital except to the extent that other Federal agencies are authorized or required by law to pay expenses incident to such transfers. Whenever an alien addict transferred to a Service hospital pursuant to this subsection is entitled to his discharge but is subject to deportation, in lieu of being returned to the penal institution from which he came he shall be deported by the authority vested by law with power over deportation.

(b) (1) Any narcotic addict confined in any institution, who has been convicted of an offense against the United States, shall not be eligible for parole under sections 1 to 8, inclusive, of the Act of June 25, 1910, as amended (U. S. C., 1940 edition, title 18, sections 714-723), or under the provisions of any Act or regulation relating to parole, nor, except in accordance with clause (2), shall he receive any commutation allowance for good conduct in accordance with the provisions of the Act of June 21, 1902, as amended (U. S. C., 1940 edition, title 18, sections 710-712a), and Acts supplemental thereto, unless and until the Surgeon General shall have certified that said individual is no longer an addict. When such certificate shall have been made, the board of parole of the penal, correctional, disciplinary, or reformatory institution from which such former addict was transferred may authorize his release on parole without transfer back to such institution.

(2) The Act of June 21, 1902, as amended (U. S. C., 1940 edition, title 18, sections 710-712a), providing for commutation of sentences of United States prisoners for good conduct, shall be applicable to any prisoner engaged in any industry, plant, factory, or shop established under section 342; and in addition thereto each such prisoner, without regard to length of sentence, may, in the discretion of the Surgeon General, be allowed, under the same terms and conditions as provided in the Act of Congress referred to in this section, a deduction in his sentence of not to exceed three days for each month of actual employment in said industry, plant, factory, or shop for the first year or any part thereof, and for any succeeding year or any part thereof not to exceed five days for each month of actual employment in said industry, plant, factory, or shop.

(c) Not later than one month prior to the expiration of the sentence of any addict confined in a Service hospital, he shall be examined by the Surgeon General or his authorized representative. If the Surgeon General believes the person to be discharged is still an addict and that he may by further treatment in a Service hospital be cured of his addiction, the addict shall be informed, in accordance with regulation, of the advisability of his submitting himself to



further treatment. The addict may then apply in writing to the Surgeon General for further treatment in a Service hospital for a period not exceeding the maximum length of time considered necessary by the Surgeon General. Upon approval of the application by the Surgeon General or his authorized agent, the addict may be given such further treatment as is necessary to cure him of his addiction.

(d) Every person convicted of an offense against the United States upon discharge, or upon his release on parole, from a hospital of the Service shall be furnished with the gratuities and transportation authorized by law to be furnished to prisoners upon release from a penal, correctional, disciplinary, or reformatory institution.

(e) Any court of the United States having the power to suspend the imposition or execution of sentence and to place a defendant on probation under any existing laws may impose as one of the conditions of such probation that the defendant, if an addict, shall submit himself for treatment at a hospital of the Service especially equipped for the accommodation of addicts until discharged therefrom as cured and that he shall be admitted thereto for such purpose. Upon the discharge of any such probationer from a hospital of the Service, he shall be furnished with the gratuities and transportation authorized by law to be furnished to prisoners upon release from a penal, correctional, disciplinary, or reformatory institution. The actual and necessary expense incident to transporting such probationer to such hospital and to furnishing such transportation and gratuities shall be paid from the appropriation for the maintenance of such hospital except to the extent that other Federal agencies are authorized or required by law to pay the cost of such transportation: *Provided*, That where existing law vests a discretion in any officer as to the place to which transportation shall be furnished or as to the amount of clothing and gratuities to be furnished, such discretion shall be exercised by the Surgeon General with respect to addicts discharged from hospitals of the Service.

#### VOLUNTARY PATIENTS

SEC. 344. (a) Any addict, whether or not he shall have been convicted of an offense against the United States, may apply to the Surgeon General for admission to a hospital of the Service especially equipped for the accommodation of addicts.

(b) Any applicant shall be examined by the Surgeon General who shall determine whether the applicant is an addict, whether by treatment in a hospital of the Service he may probably be cured of his addiction and the estimated length of time necessary to effect his cure. The Surgeon General may, in his discretion, admit the applicant to a Service hospital. No such addict shall be admitted unless he agrees to submit to treatment for the maximum amount of time estimated by the Surgeon General to be necessary to effect a cure, and unless suitable accommodations are available after all eligible addicts convicted of offenses against the United States have been admitted. Any such addict may be required to pay for his subsistence, care, and treatment at rates fixed by the Surgeon General and amounts so paid shall be covered into the Treasury of the United States to the credit of the appropriation from which the expenditure for his subsistence, care, and treatment was made.

(d) Any addict admitted for treatment under this section may be confined in a hospital of the Service for a period not exceeding the maximum amount of time estimated by the Surgeon General as necessary to effect a cure of the addiction or until such time as he ceases to be an addict.

(e) Any addict admitted for treatment under this section shall not thereby forfeit or abridge any of his rights as a citizen of the United States; nor shall such admission or treatment be used against him in any proceeding in any court; and the record of his voluntary commitment shall be confidential and shall not be divulged.

#### PENALTIES

SEC. 345. (a) Any person not authorized by law or by the Surgeon General who introduces or attempts to introduce into a hospital of the Service at which addicts are treated and cared for, or within the grounds adjoining or adjacent thereto, any habit-forming narcotic drugs, weapon, or any other article or thing specified in regulations, including any letter, message, or alcoholic beverage so specified, which is intended to be received by an inmate thereof, shall be guilty of a felony punishable by confinement in a penitentiary for a period of not more than ten years.



(b) It shall be unlawful for any person properly committed thereto to escape or attempt to escape from a hospital of the Service for the cure of addicts, and any such person upon apprehension and conviction in a United States court shall be punished by imprisonment for not more than five years, such sentence to begin upon the expiration of the sentence for which such person was originally confined.

(c) Any person who procures the escape of any person admitted to a hospital of the Service for the care of addicts or who advises, connives at, aids, or assists in such escape, or who conceals any such inmate after such escape, shall be punished upon conviction in a United States court by imprisonment in the penitentiary for not more than three years.

## PART F—BIOLOGICAL PRODUCTS

### REGULATION OF BIOLOGICAL PRODUCTS

SEC. 351. (a) No person shall sell, barter, or exchange, or offer for sale, barter, or exchange in the District of Columbia, or send, carry, or bring for sale, barter, or exchange from any State or possession into any other State or possession or into any foreign country, or from any foreign country into any State or possession, any virus, therapeutic serum, toxin, antitoxin, or analogous product, or arsphenamine or its derivatives (or any other organic arsenic compound analogous thereto), applicable to the prevention, treatment, or cure of diseases or injuries of man, unless (1) such virus, serum, toxin, antitoxin, or other product has been propagated or manufactured and prepared at an establishment holding an unsuspended and unrevoked license, issued by the Administrator as hereinafter authorized, to propagate or manufacture, and prepare such virus, serum, toxin, antitoxin, or other product for sale in the District of Columbia, or for sending, bringing, or carrying from place to place aforesaid; and (2) each package of such virus, serum, toxin, antitoxin, or other product is plainly marked with the proper name of the article contained therein, the name, address, and license number of the manufacturer, and the date beyond which the contents cannot be expected beyond reasonable doubt to yield their specific results. The suspension or revocation of any license shall not prevent the sale, barter, or exchange of any virus, serum, toxin, antitoxin, or other product aforesaid which has been sold and delivered by the licensee prior to such suspension or revocation, unless the owner or custodian of such virus, serum, toxin, antitoxin, or other product aforesaid has been notified by the Administrator not to sell, barter, or exchange the same.

(b) No person shall falsely label or mark any package or container of any virus, serum, toxin, antitoxin, or other product aforesaid; nor alter any label or mark on any package or container of any virus, serum, toxin, antitoxin, or other product aforesaid so as to falsify such label or mark.

(c) Any officer, agent, or employee of the Service, authorized by the Surgeon General for the purpose, may during all reasonable hours enter and inspect any establishment for the propagation or manufacture and preparation of any virus, serum, toxin, antitoxin, or other product aforesaid for sale, barter, or exchange in the District of Columbia, or to be sent, carried, or brought from any State or possession into any other State or possession or into any foreign country, or from any foreign country into any State or possession.

(d) Licenses for the maintenance of establishments for the propagation or manufacture and preparation of products described in subsection (a) of this section may be issued only upon a showing that the establishment and the products for which a license is desired meet standards, designed to insure the continued safety, purity, potency and efficaciousness of such products, prescribed in regulations made jointly by the Surgeon General, the Surgeon General of the Army, and the Surgeon General of the Navy, and approved by the Administrator, and licenses for new products may be issued only upon a showing that they meet such standards. All such licenses shall be issued, suspended, and revoked as prescribed by regulations and all licenses issued for the maintenance of establishments for the propagation or manufacture and preparation, in any foreign country, of any such products for sale, barter, or exchange in any State or possession shall be issued upon condition that the licensees will permit the inspection of their establishments in accordance with subsection (c) of this section.

(e) No person shall interfere with any officer, agent, or employee of the Service in the performance of any duty imposed upon him by this section or by regulations made by authority thereof.

(f) Any person who shall violate, or aid or abet in violating, any of the provisions of this section shall be punished upon conviction by a fine not exceeding \$500 or by imprisonment not exceeding one year, or by both such fine and imprisonment, in the discretion of the court.

#### PREPARATION OF BIOLOGICAL PRODUCTS

SEC. 352. (a) The Service may prepare for its own use any product described in section 351 and any product necessary to carrying out any of the purposes of section 301.

(b) The Service may prepare any product described in section 351 for the use of other Federal departments or agencies, and public or private agencies and individuals engaged in work in the field of medicine when such product is not available from establishments licensed under such section.

#### PART G—QUARANTINE AND INSPECTION

##### CONTROL OF COMMUNICABLE DISEASES

SEC. 361. (a) The Surgeon General, with the approval of the Administrator, is authorized to make and enforce such regulations as in his judgment are necessary to prevent the introduction, transmission, or spread of communicable diseases from foreign countries into the States or possessions, or from one State or possession into any other State or possession. For purposes of carrying out and enforcing such regulations, the Surgeon General may provide for such inspection, fumigation, disinfection, sanitation, pest extermination, and other measures as in his judgment may be necessary.

(b) Regulations prescribed under this section shall not provide for the apprehension, detention, or conditional release of individuals except for the purpose of preventing the introduction, transmission, or spread of such communicable diseases as may be specified from time to time in Executive orders of the President upon the recommendation of the National Advisory Health Council and the Surgeon General.

(c) Except as provided in subsection (d), regulations prescribed under this section, insofar as they provide for the apprehension, detention, examination, or conditional release of individuals, shall be applicable only to individuals coming into a State or possession from a foreign country, the Territory of Hawaii, or a possession.

(d) On recommendation of the National Advisory Health Council, regulations prescribed under this section may provide for the apprehension and examination of any individual reasonably believed to be infected with a communicable disease in a communicable stage and (1) to be moving or about to move from a State to another State; or (2) to be a probable source of infection to individuals who, while infected with such disease in a communicable stage, will be moving from a State to another State. Such regulations may provide that if upon examination any such individual is found to be infected, he may be detained for such time and in such manner as may be reasonably necessary.

##### SUSPENSION OF ENTRIES AND IMPORTS FROM DESIGNATED PLACES

SEC. 362. Whenever the Surgeon General determines that by reason of the existence of any communicable disease in a foreign country there is serious danger of the introduction of such disease into the United States, and that this danger is so increased by the introduction of persons or property from such country that a suspension of the right to introduce such persons and property is required in the interest of the public health, the Surgeon General, in accordance with regulations approved by the President, shall have the power to prohibit, in whole or in part, the introduction of persons and property from such countries or places as he shall designate in order to avert such danger, and for such period of time as he may deem necessary for such purpose.

##### SPECIAL POWERS IN TIME OF WAR

SEC. 363. To protect the military and naval forces and war workers of the United States, in time of war, against any communicable disease specified in Executive orders as provided in subsection (b) of section 361, the Surgeon General, on recommendation of the National Advisory Health Council, is authorized to

provide by regulations for the apprehension and examination, in time of war, of any individual reasonably believed (1) to be infected with such disease in a communicable stage and (2) to be a probable source of infection to members of the armed forces of the United States or to individuals engaged in the production or transportation of arms, munitions, ships, food, clothing, or other supplies for the armed forces. Such regulations may provide that upon examination any such individual is found to be so infected, he may be detained for such time and in such manner as may be reasonably necessary.

#### QUARANTINE STATIONS

Sec. 364. (a). Except as provided in title II of the Act of June 15, 1917 (40 Stat. 220), as amended (50 U. S. C. 1940 edition, secs. 191-194), the Surgeon General shall control, direct, and manage all United States quarantine stations, grounds, and anchorages, designate their boundaries, and designate the quarantine officers to be in charge thereof. With the approval of the President he shall from time to time select suitable sites for and establish such additional stations, grounds, and anchorages in the States and possessions of the United States as in his judgement are necessary to prevent the introduction of communicable diseases into the States and possessions of the United States.

(b) The Surgeon General shall establish by regulation the hours during which quarantine service shall be performed at each quarantine station, and, upon application by any interested party, may establish quarantine inspection during the twenty-four hours of the day, or any fraction thereof, at such quarantine station as, in his opinion, require such extended service. He may restrict the performance of quarantine inspection to hours of daylight for such arriving vessels as cannot, in his opinion, be satisfactorily inspected during hours of darkness. No vessel shall be required to undergo quarantine inspection during the hours of darkness, unless the quarantine officer at such quarantine station shall deem an immediate inspection necessary to protect the public health. Uniformity shall not be required in the regulations governing the hours during which quarantine inspection may be obtained at the various ports of the United States.

#### CERTAIN DUTIES OF CONSULAR AND OTHER OFFICERS

Sec. 365. (a) Whenever any vessel shall leave any port or place, infected with any communicable disease, in any foreign country or in the Territories or possessions of the United States, or, having on board goods or passengers coming from any place so infected, shall leave any such port or place, bound for any port or place in a State or a possession of the United States, the consular officer of the United States or the Public Health Service officer, or other medical officer of the United States designated by the Surgeon General, at or nearest such port of departure shall immediately notify the Surgeon General of the name, the date of departure, and the port of destination of such vessel. Each such consular or other officer shall also make reports to the Surgeon General of the health conditions at the port or place at which he is stationed on such forms and at such intervals as the Surgeon General shall prescribe.

(b) It shall be the duty of the customs officers, and of Coast Guard officers under their direction, to aid in the enforcement of quarantine rules and regulations; but no additional compensation, except actual and necessary traveling expenses, shall be allowed any such officer by reason of such services.

#### BILLS OF HEALTH

Sec. 366. (a) Any vessel at any foreign port or place clearing or departing for any port or place in a State or possession shall be required to obtain from the consular officer of the United States or from the Public Health Service officer or other medical officer of the United States designated by the Surgeon General, at the port or place of departure, a bill of health in duplicate, in the form prescribed by the Surgeon General. The President, from time to time, shall specify the ports at which a medical officer shall be stationed for this purpose. Such bill of health shall set forth the sanitary history and condition of said vessel, and shall state that it has in all respects complied with the regulations prescribed pursuant to subsection (c). Before granting such duplicate bill of health, such consular or medical officer shall be satisfied that the matters and things therein stated are true. The consular officer shall be entitled to demand and receive the fees for bills of health and such fees shall be established by regulation.



(b) Original bills of health shall be delivered to the collectors of customs at the port of entry. Duplicate copies of such bills of health shall be delivered at the time of inspection to quarantine officers at such ports. The bills of health herein prescribed shall be considered as part of the ship's papers, and when duly certified to by the proper consular or other officer of the United States, over his official signature and seal, shall be accepted as evidence of the statements therein contained in any court of the United States.

(c) The Surgeon General shall from time to time prescribe regulations, applicable to vessels referred to in subsection (a) of this section for the purpose of preventing the introduction into the States or possessions of the United States of any communicable disease by securing the best sanitary condition of such vessels, their cargoes, passengers, and crews. Such regulations shall be observed by such vessels prior to departure, during the course of the voyage, and also during inspection, disinfection, or other quarantine procedure upon arrival at any United States quarantine station.

(d) The provisions of subsections (a) and (b) of this section shall not apply to vessels plying between such foreign ports on or near the frontiers of the United States and ports of the United States as are designated by treaty or may be designated by regulation; nor, to the extent prescribed by regulations to such of the other vessels, referred to in subsection (a) hereof as may be designated in such regulations.

(e) It shall be unlawful for any vessel to enter any port in any State or possession of the United States to discharge its cargo, or land its passengers, except upon a certificate of the quarantine officer that regulations prescribed under subsection (c) have in all respects been complied with by such officer, the vessel, and its master. The master of every such vessel shall deliver such certificate to the collector of customs at the port of entry, together with the original bill of health and other papers of the vessel.

#### CIVIL AIR NAVIGATION AND CIVIL AIRCRAFT

SEC. 367. The Surgeon General is authorized to provide by regulations for the application to civil air navigation and civil aircraft of any of the provisions of sections 364, 365, and 366 and regulations prescribed thereunder (including penalties and forfeitures for violations thereof), to such extent and upon such conditions as he deems necessary for the safeguarding of the public health.

#### PENALTIES

SEC. 368. (a) Any person who violates any regulation prescribed under section 361, 362, or 363, or any provision of section 366 or any regulation prescribed thereunder, or who enters or departs from the limits of any quarantine station, ground, or anchorage in disregard of quarantine rules and regulations or without permission of the quarantine officer in charge, shall be punished by a fine of not more than \$1,000 or by imprisonment for not more than two years, or both.

(b) Any vessel which violates section 364 or section 366, or any regulations thereunder, or in accordance with section 367, or which enters within or departs from the limits of any quarantine station, ground, or anchorage in disregard of the quarantine rules and regulations or without permission of the officer in charge, shall forfeit to the United States not more than \$5,000, the amount to be determined by the court, which shall be a lien on such vessel, to be recovered by proceedings in the proper district court of the United States. In all such proceedings the United States district attorney shall appear on behalf of the United States; and all such proceedings shall be conducted in accordance with the rules and laws governing cases of seizure of vessels for violation of the revenue laws of the United States.

(c) With the approval of the Administrator, the Surgeon General may, upon application therefor, remit or mitigate any forfeiture provided for under subsection (b) of this section, and he shall have authority to ascertain the facts upon all such applications.

#### ADMINISTRATION OF OATHS

SEC. 369. Medical officers of the United States, when performing duties as quarantine officers at any port or place within the United States, are authorized to take declarations and administer oaths in matters pertaining to the administration of the quarantine laws and regulations of the United States.



## APPROPRIATIONS

SEC. 370. There are hereby authorized to be appropriated from time to time sums sufficient to provide such additional facilities as may be required by the Public Health Service for the discharge of its functions under this Act.

## TITLE IV—NATIONAL CANCER INSTITUTE

## TO BE A DIVISION IN NATIONAL INSTITUTE OF HEALTH

SEC. 401. The National Cancer Institute shall be a division in the National Institute of Health.

## CANCER RESEARCH, AND SO FORTH

SEC. 402. In carrying out the purposes of section 301 with respect to cancer the Surgeon General, through the National Cancer Institute and in cooperation with the National Cancer Advisory Council, shall—

- (a) conduct, assist, and foster researches, investigations, experiments, and studies relating to the cause, prevention, and methods of diagnosis and treatment of cancer;
- (b) promote the coordination of researches conducted by the Institute and similar researches conducted by other agencies, organizations, and individuals;
- (c) provide training and instruction in technical matters relating to the diagnosis and treatment of cancer;
- (d) provide fellowships in the Institute from funds appropriated or donated for such purpose;
- (e) secure for the Institute consultation services and advice of cancer experts from the United States and abroad;
- (f) cooperate with State health agencies in the prevention, control, and eradication of cancer;
- (g) procure, use, and lend radium as provided in section 403.

## ADMINISTRATION

SEC. 403. (a) In carrying out the provisions of section 402 all appropriate provisions of section 301 shall be applicable to the authority of the Surgeon General, and he is authorized—

- (1) to purchase radium, from time to time, without regard to section 3709 of the Revised Statutes, to make such radium available for the purposes of this title, both to the Service and by loan to other agencies and institutions for such consideration and subject to such conditions as he may prescribe;
- (2) to provide the necessary facilities where training and instruction may be given in all technical matters relating to diagnosis and treatment of cancer to persons found by the Surgeon General to have proper technical qualifications, and designated by him for such training or instruction, and to fix and pay them a per diem allowance during such training or instruction of not to exceed \$10.

(b) The Surgeon General shall recommend acceptance of conditional gifts pursuant to section 501, of this Act, for study, investigation, or research into the cause, prevention, and methods of diagnosis and treatment of cancer, or for the acquisition of grounds or for the erection, equipment, or maintenance of premises, buildings, or equipment of the Institute, only after consultation with the National Cancer Advisory Council. Donations of \$50,000 or over in aid of research under this title may be acknowledged by the establishment within the Institute of suitable memorials to the donors.

(c) In carrying out the purposes of section 402 grants-in-aid for cancer projects shall be made only after review and recommendation of the National Cancer Advisory Council made pursuant to section 404.

## FUNCTIONS OF COUNCIL

SEC. 404. The Council is authorized—

- (a) to review research projects or programs submitted to or initiated by it relating to the study of the cause, prevention, or methods of diagnosis and treatment of cancer, and certify approval to the Surgeon General for prosecution under section 402 any such projects which it believes show promise of

making valuable contributions to human knowledge with respect to the cause, prevention, or methods of diagnosis and treatment of cancer;

(b) to collect information as to studies which are being carried on in the United States or any other country as to the cause, prevention, and methods of diagnosis and treatment of cancer, by correspondence or by personal investigation of such studies, and with the approval of the Surgeon General make available such information through the appropriate publications for the benefit of health agencies and organizations (public or private), physicians, or any other scientists, and for the information of the general public;

(c) to review applications from any university, hospital, laboratory, or other institution whether public or private, or from individuals, for grants-in-aid for research projects relating to cancer, and certify to the Surgeon General its approval of grants-in-aid in the cases of such projects which show promise of making valuable contributions to human knowledge with respect to the cause, prevention, or methods of diagnosis or treatment of cancer;

(d) to recommend to the Surgeon General for acceptance conditional gifts pursuant to section 501 of this Act; and

(e) recommendations for administration of law. To make recommendations to the Surgeon General with respect to carrying out the provisions of this title.

#### APPROPRIATIONS

SEC. 405. Appropriations to carry out the purposes of this title shall be available for the acquisition of land or the erection of buildings only if so specified, but in the absence of express limitation therein may be expended in the District of Columbia for personal services, stenographic recording and translating services, by contract if deemed necessary, without regard to section 3709 of the Revised Statutes; traveling expenses (including the expenses of attendance at meetings when specifically authorized by the Surgeon General); rental, supplies and equipment, purchase and exchange of medical books, books of reference, directories, periodicals, newspapers, and press clippings; purchase, operation, and maintenance of motor-propelled passenger-carrying vehicles; printing and binding (in addition to that otherwise provided by law); and for all other necessary expenses in carrying out the provisions of this title.

#### OTHER WORK WITH RESPECT TO CANCER

SEC. 406. This title shall not be construed as limiting (1) the functions or authority of the Surgeon General or the Public Health Service under any other title of this Act, or of any other officer or agency of the United States, relating to the study of the prevention, diagnosis, and treatment of cancer; or (2) the expenditure of money therefor.

#### TITLE V—MISCELLANEOUS

##### GIFTS

SEC. 501. (a) The Administrator is authorized to accept on behalf of the United States gifts made unconditionally by will or otherwise for the benefit of the Service or for the carrying out of any of its functions. Conditional gifts may be so accepted if recommended by the Surgeon General, and the principal of and income from any such conditional gift shall be held, invested, reinvested, and used in accordance with its conditions, but no gift shall be accepted which is conditioned upon any expenditure not to be met therefrom or from the income thereof unless such expenditure has been approved by Act of Congress.

(b) Any unconditional gift of money accepted pursuant to the authority granted in subsection (a) of the section, the net proceeds from the liquidation (pursuant to subsection (c) or subsection (d) of this section) of any other property so accepted, and the proceeds of insurance on any such gift property not used for its restoration, shall be deposited in the Treasury of the United States and are hereby appropriated and shall be held in trust by the Secretary of the Treasury for the benefit of the Service, and he may invest and reinvest such funds in interest-bearing obligations of the United States or in obligations guaranteed as to both principal and interest by the United States. Such gifts and the income from such investments shall be available for expenditure in the opera-

tion of the Service and the performance of its functions, subject to the same examination and audit as is provided for appropriations made for the Service by Congress.

(c) The evidences of any unconditional gift of intangible personal property, other than money, accepted pursuant to the authority granted in subsection (a) of this section shall be deposited with the Secretary of the Treasury and he, in his discretion, may hold them, or liquidate them except that they shall be liquidated upon the request of the Administrator, whenever necessary to meet payments required in the operation of the Service or the performance of its functions. The proceeds and income from any such property held by the Secretary of the Treasury shall be available for expenditure as is provided in subsection (b) of this section.

(d) The Administrator shall hold any real property or any tangible personal property accepted unconditionally pursuant to the authority granted in subsection (a) of this section and he shall permit such property to be used for the operation of the Service and the performance of its functions or he may lease or hire such property, and may insure such property, and deposit the income thereof with the Secretary of the Treasury to be available for expenditure as provided in subsection (b) of this section: *Provided*, That the income from any such real property or tangible personal property shall be available for expenditure in the discretion of the Administrator for the maintenance, preservation, or repair and insurance of such property and that any proceeds from insurance may be used to restore the property insured. Any such property when not required for the operation of the Service or the performance of its functions may be liquidated by the Administrator, and the proceeds thereof deposited with the Secretary of the Treasury, whenever in his judgment the purposes of the gifts will be served thereby.

#### USE OF IMMIGRATION STATION HOSPITALS

SEC. 502. The Immigration and Naturalization Service may, by agreement of the heads of the departments concerned, permit the Public Health Service to use hospitals at immigration stations for the care of Public Health Service patients. There shall be a charge for such use for the actual cost of fuel, light, water, telephone, and similar supplies and services, but no charge for the expense of physical upkeep of the hospitals. Such charges shall be covered into the proper Immigration and Naturalization Service appropriations.

#### MONEY COLLECTED FOR CARE OF PATIENTS

SEC. 503. The Immigration and Naturalization Service shall reimburse the Surgeon General for the care and treatment of individuals detained in hospitals of the Public Health Service under the immigration laws and regulations. Amounts so reimbursed, money collected as provided by law for expenses incurred in the care and treatment of foreign seamen, and money received for the care and treatment of pay patients shall be covered into the appropriation from which the expenses of such care and treatment were paid.

#### CARE OF PUBLIC HEALTH SERVICE PATIENTS AT SAINT ELIZABETHS HOSPITAL

SEC. 504. Insane patients entitled to treatment by the Service shall be admitted, upon order of the Surgeon General, into Saint Elizabeths Hospital or any hospital, institution, or station of the Service especially equipped for the accommodation of such patients and shall be cared for and treated therein until cured or until ordered removed by him. Any reimbursement received as the result of such care and treatment shall be covered into the appropriation from which the expenses of such care and treatment were paid.

#### SETTLEMENT OF CLAIMS

SEC. 505. The Administrator may consider, ascertain, adjust, and determine any claim which shall accrue, on account of damages occasioned by collisions or incident to the operation of vessels of the Service, and for which damages such vessels are found by him to be responsible. To be considered for settlement under this section, claims must be presented to the Administrator within one year of their accrual. The amount ascertained and determined to be due any claimant, not exceeding \$3,000 in any one case, shall be certified to Congress as a legal claim for payment out of appropriations that may be made therefor by Congress.



together with a brief statement of the character of each claim, the amount claimed, and the amount allowed. Acceptance by any claimant of the amount determined to be due under this section shall be deemed to be in full and final settlement of such claim against the Government of the United States.

#### TRANSPORTATION OF REMAINS OF OFFICERS

SEC. 506. Appropriations available for traveling expenses of the Service shall be available for meeting the cost of preparation for shipment and of transportation to their former homes of remains of commissioned officers, and personnel specified in regulations of the Surgeon General approved by the Administrator, who die in line of duty.

#### SETTLEMENT OF ACCOUNTS OF DECEASED OFFICERS

SEC. 507. (a) In the settlement of the accounts of deceased commissioned officers where the amount due the decedent's estate is less than \$1,000 and no demand is presented by a duly appointed representative of the estate, the accounting officers may allow the amount found due to the decedent's widow or legal heirs in the following order of precedence: First, to the widow; second, if the decedent left no widow, or the widow be dead at time of settlement, then to the children or their issue, per stirpes; third, if no widow or children or their issue, then to the father and mother in equal parts, provided the father has not abandoned the support of his family, in which case to the mother alone; fourth, if either the father or mother be dead, then to the one surviving; fifth, if there be no widow, child, father, or mother at the date of settlement, then to the brothers and sisters and children of deceased brothers and sisters, per stirpes.

(b) Subsection (a) shall not be construed so as to prevent payment of funeral expenses from the amount due the decedent's estate if a claim therefor is presented, before settlement by the accounting officers, by the person or persons who actually paid such expenses.

#### ANNUAL REPORT

SEC. 508. The Surgeon General shall make a full report to Congress, at the beginning of each regular session, of the administration of the functions of the Service under this act, including a detailed statement of receipts and disbursements.

### TITLE VI—TEMPORARY AND EMERGENCY PROVISIONS AND REPEALS

#### EXISTING POSITIONS, PROCEDURES, AND SO FORTH

SEC. 601. (a) The provisions of this act shall not affect the term or tenure of office of the Surgeon General, or of any member of the National Advisory Health Council or the National Advisory Cancer Council, in office at the time of its enactment.

(b) Notwithstanding the provisions of this Act, existing positions, divisions, committees, and procedures in the Public Health Service shall continue unless and until abolished, changed, or transferred pursuant to authority granted in this Act.

#### EXISTING REGULATIONS, AND SO FORTH

SEC. 602. Notwithstanding the provisions of this Act, existing rules, regulations of or applicable to the Service, and Executive orders, shall remain in effect until repealed, or until modified or superseded by regulations made in accordance with the provisions of this Act.

#### FUNDS, APPROPRIATIONS, AND PROPERTY

SEC. 603. All appropriations, allocations, and other funds, and all properties available for use by the Public Health Service or any division or unit thereof shall continue to be available to the Service and, for the purpose of any reorganization under section 2 of this Act, the Federal Security Administrator, with the approval of the Director of the Bureau of the Budget, is hereby authorized to make such transfer of funds between appropriations as may be necessary for the continuance of transferred functions.



## EMERGENCY FUND

SEC. 604. The sum of \$1,500,000 to be available until expended, is authorized to be appropriated for emergency construction or purchase of additional facilities and for the remodeling and extension of existing or newly acquired facilities for use by the Public Health Service when found by the Administrator, with the approval of the President, to be necessary for the discharge of the functions of the Service during the present emergency. No expenditure from the sum herein authorized to be appropriated shall be incurred later than 6 months after the termination of the present war as proclaimed by the President or at such earlier time as the Congress may designate by concurrent resolution.

## EMPLOYEES' COMPENSATION

SEC. 605. (a) Section 7 of the Act of September 7, 1916, entitled "An Act to provide compensation for employees of the United States suffering injuries while in the performance of their duties, and for other purposes", as amended (U. S. C., 1940 edition, title 5, sec. 757), is amended by changing the period at the end thereof to a colon and adding the following: "*Provided*, That any person who is eligible to receive any benefits authorized by this Act and who, by reason of services performed as an employee as defined in section 40, is also eligible under any other law of the United States to receive from the United States any payments or benefits (other than the proceeds of any insurance policy) for the same injury or death shall elect which benefits he shall receive but nothing in this Act shall prevent any such person at any time from claiming or receiving the greater benefit whether under this Act or any other such law."

(b) The definition of the term "employee" in section 40 of such Act, as amended (U. S. C., 1940 edition, title 5, sec. 790), is amended to read as follows:

"The term 'employee' includes all civil officers and employees of the United States and of the Panama Railroad Company, including commissioned officers of the Regular Corps of the Public Health Service, officers in the Reserve of the Public Health Service on active duty, and all persons, other than independent contractors and their employees, employed on the Menominee Indian Reservation in the State of Wisconsin, subsequent to September 7, 1916, in operations conducted pursuant to the Act entitled 'An Act to authorize the cutting of timber, the manufacture and sale of lumber, and the preservation of the forests on the Menominee Indian Reservation in the State of Wisconsin,' approved March 28, 1908, as amended, or any other Act relating to tribal timber and logging operations on the Menominee Reservation."

## EMERGENCY PER DIEM RATES

SEC. 606. From the date of the approval of this Act until the expiration of the six-month period immediately succeeding the termination of the present emergency as declared by the President, the Federal Security Administrator, in prescribing per diem rates of allowance, not exceeding \$8, in lieu of subsistence, for commissioned officers of the Public Health Service traveling on official business and away from their designated posts of duty, pursuant to the second paragraph of section 12 of the Pay Readjustment Act of 1942 (56 Stat. 364), is hereby authorized to prescribe such per diem rates of allowance, whether or not orders are given to such officers for travel to be performed repeatedly between two or more places in the same vicinity, and without regard to the length of time away from their designated posts of duty under such orders.

## USE OF PUBLIC HEALTH SERVICE DURING PRESENT WAR

SEC. 607. If an Executive order is issued in accordance with the provisions of section 216 during the present war, service performed by any commissioned officer of the Service on or after December 7, 1941, and before the date of such order shall be deemed, for purposes of compensation and other veterans' benefits, to have been performed by him as a member of the land or naval forces of the United States.

## AMENDMENT TO SOLDIERS' AND SAILORS' CIVIL RELIEF ACT OF 1940

SEC. 608. (a) Section 101 (1) of the Soldiers' and Sailors' Civil Relief Act of 1940 (54 Stat. 1178), as amended, is hereby amended to read as follows:

"(1) The term 'persons in military service' and the term 'persons in military service of the United States,' as used in this Act, shall include the following per-

sons and no others: All members of the Army of the United States, the United States Navy, the Marine Corps, the Coast Guard, the Women's Army Corps, and commissioned officers of the Public Health Service when declared by Executive order of the President to be in the military service. The term 'military service,' as used in this Act, shall signify Federal service on active duty with any branch of service heretofore referred to or mentioned as well as training or education under the supervision of the United States preliminary to induction into the military service. The terms 'active service' or 'active duty' shall include the period during which a person in military service is absent from duty on account of sickness, wounds, leave, or other lawful cause."

(b) Section 601 (1) of such Act, as amended, is hereby amended to read as follows:

"(1) In any proceeding under this Act a certificate signed by The Adjutant General of the Army as to persons in the Army or in any branch of the United States service while serving pursuant to law with the Army of the United States, signed by the Chief of the Bureau of Personnel of the Navy Department as to persons in the United States Navy or in any other branch of the United States service while serving pursuant to law with the United States Navy, signed by the Commandant, United States Marine Corps, as to persons in the Marine Corps, or in any other branch of the United States service while serving pursuant to law with the Marine Corps, and signed by the Surgeon General as to commissioned officers of the Public Health Service on active duty when declared by Executive order of the President to be in the military service, or signed by an officer designated by any of them, respectively, for the purpose, shall when produced by prima facie evidence as to any of the following facts stated in such certificate:

"That a person named has not been, or is, or has been in military service; the time when and the place where such person entered military service, his residence at that time, and the rank, branch, and unit of such service that he entered, the dates within which he was in military service, the monthly pay received by such person at the date of issuing the certificate, the time when and the place where such person died in or was discharged from such service."

#### REPEAL OF EXISTING LAW

SEC. 609. The following statutes and parts of statutes are hereby repealed:

Section 3657 in title XL, section 3689 in title XLI, and sections 4801, 4802, 4803, 4804, 4805, and 4806 in title LIX of the Revised Statutes of the United States;

The last paragraph under the heading "Miscellaneous" in chapter 130, 18 Statutes at Large 371, which paragraph is the seventh beginning on page 377;

Chapter 156, 18 Statutes at Large 485;

Chapter 202, 20 Statutes at Large 484;

Chapter 61, 21 Statutes at Large 46;

Section 1 and the final clause of section 2 (which reads as follows: "and the said quarantine stations when so established shall be conducted by the Marine Hospital Service under regulations framed in accordance with the Act of April twenty-ninth, eighteen hundred and seventy-eight") of chapter 727, 25 Statutes at Large 355;

Chapter 19, 25 Statutes at Large 639;

Chapter 51, 26 Statutes at Large 31;

The last sentence of the paragraph headed "Office of the Supervising Surgeon General, Marine Hospital Service" in chapter 541, 26 Statutes at Large 908, which appears at page 923 and reads as follows: "And hereafter, the Supervising Surgeon General is hereby authorized to cause the detail of two surgeons and two passed assistant surgeons for duty in the Bureau, who shall each receive the pay and allowances of their respective grades in the general service.";

Chapter 114, 27 Statutes at Large 449;

The last sentence of the paragraph headed "Office of Supervising Surgeon General, Marine Hospital Service", in chapter 174, 28 Statutes at Large 162, which appears at page 179 and is as follows: "And hereafter the Supervising Surgeon General of the Marine Hospital Service is hereby authorized to cause the detail of an additional medical officer and one hospital steward for duty in the Bureau, who shall each receive the pay and allowance of his respective grade in the general service.";

Chapter 213, 28 Statutes at Large 229;

Chapter 300, 28 Statutes at Large 372;

The last sentence of the paragraph headed "Office of Supervising Surgeon General, Marine Hospital Service", in chapter 177, 28 Statutes at Large 764, which

appears at page 780 and is as follows: "And hereafter the Supervising Surgeon General of the Marine Hospital Service is hereby authorized to cause the detail of two hospital attendants from the port of New York for duty in the laboratory of the Bureau, and who shall each receive the pay equivalent to the compensation of a first-class hospital attendant.";

The proviso at the end of the paragraph headed "Office of Supervising Surgeon General, Marine Hospital Service" in chapter 265, 29 Statutes at Large 538, which appears at page 554 and is as follows: "*Provided*, That the Secretary of the Treasury is hereby authorized, in his discretion, to grant to the medical officers of the Marine Hospital Service commissioned by the President, without deduction of pay, leaves of absence for the same period of time and in the same manner as is now authorized to be granted to officers of the Army by the Secretary of War";

Chapter 349, 30 Statutes at Large 976;

Section 10, chapter 191, 31 Statutes at Large 77;

The first paragraph of section 97 of chapter 339, 31 Statutes at Large 141;

Chapter 836, 31 Statutes at Large 1086;

That portion of the third paragraph of section 84 of chapter 1369, 32 Statutes at Large 691 which appears on page 711 and reads as follows: "and the provisions of law relating to the public health and quarantine shall apply in the case of all vessels entering a port of the United States or its aforesaid possessions from said islands, where the customs officers at the port of departure shall perform the duties required by such law of consular officers in foreign ports";

Chapter 1370, 32 Statutes at Large 712;

Chapter 1378, 32 Statutes at Large 728;

Chapter 1443, 33 Statutes at Large 1009;

The last sentence of the last paragraph under the head "Public Health and Marine Hospital Service" in chapter 1484, 33 Statutes at Large 1214, which appears at page 1217 and is as follows: "And the Secretary of the Treasury shall, for the fiscal year nineteen hundred and seven, and annually thereafter, submit to Congress, in the regular Book of Estimates, detailed estimates of the expenses of maintaining the Public Health and Marine Hospital Service,";

Public Resolution Numbered 20, 33 Statutes at Large 1283;

Chapter 3433, 34 Statutes at Large 299;

Section 17 of Chapter 1134, 34 Statutes at Large 898;

That portion of the third paragraph under the head "Back Pay and Bounty" in chapter 200, 35 Statutes at Large 373, as amended by chapter 213, 52 Statutes at Large 352, which is at page 352 of 52 Statutes at Large and reads as follows: "and of deceased commissioned officers of the Public Health Service";

The proviso in the tenth paragraph under the head "Public Health and Marine Hospital Service" in chapter 285, 36 Statutes at Large 1363, which appears in the eighth paragraph on page 1394 and is as follows: "*Provided*, That there may be admitted into said hospitals, for study, persons with infectious or other diseases affecting the public health, and not to exceed ten cases in any one hospital at one time", and the substantially similar provisions appearing under the heading "Public Health and Marine Hospital Service" or the heading "Public Health Service" in the following statutes: Chapter 355, 37 Statutes at Large 417, at page 435; chapter 3, 38 Statutes at Large 4, at page 24; chapter 209, 39 Statutes at Large 262, at page 278; chapter 28, 40 Statutes at Large 459, at page 468; chapter 113, 40 Statutes at Large 634, at page 644; chapter 24, 41 Statutes at Large 163, at page 175; chapter 288, 37 Statutes at Large 309;

The proviso at the end of the last paragraph under the head "Public Health Service" in chapter 149, 37 Statutes at Large 912, which appears at page 915 and is as follows: "*Provided*, That hereafter the director of the Hygienic Laboratory shall receive the pay and allowances of a senior surgeon";

That portion of the second paragraph under the head "Public Health Service" in chapter 3, 38 Statutes at Large 4, which appears at page 23 and reads as follows: "at least six of the assistant surgeons provided for hereunder shall be required to have had a special training in the diagnosis of insanity and mental defect for duty in connection with the examination of arriving aliens with special reference to the detection of mental defection";

The proviso at the end of the twelfth paragraph under the head "Public Health Service" in chapter 3, 38 Statutes at Large 4, which appears at page 24 and is as follows: "*Provided*, That hereafter commissioned officers and pharmacists, and those employees of the Service devoting all their time to field work, shall be entitled to hospital relief when taken sick or injured in line of duty";



The last clause of chapter 124, 38 Statutes at Large 387, which reads as follows: "and the said Secretary is hereby authorized to detail for duty on revenue cutters such surgeons and other persons of the Public Health Service as he may deem necessary";

Section 5 under the head "Nineteenth Lighthouse District" in chapter 414, 39 Statutes at Large 536, at page 538;

Chapter 26, 39 Statutes at Large 872;

That portion of section 16 of chapter 29, 39 Statutes at Large 874, which appears at page 885 and reads as follows: "who shall have had at least two years' experience in the practice of their profession since receiving the degree of doctor of medicine, and";

The sixth paragraph under the head "Public Health Service" in chapter 3, 40 Statutes at Large 2, at page 6;

The seventh paragraph under the head "Bureau of Mines" in chapter 27, 40 Statutes at Large 105, which is the third full paragraph appearing on page 146;

Chapter 37, 40 Statutes at Large 242;

The proviso in the fourth paragraph under the head "Public Health Service" in chapter 113, 40 Statutes at Large 634, which appears at page 644 and is as follows: "*Provided*, That the pay of attendants at marine hospitals, quarantine, and immigration stations, whose present compensation is less than the rate of \$1,200 per annum, may be increased to a rate not to exceed \$1,200 per annum";

The proviso in the eleventh paragraph under the head "Public Health Service" in chapter 113, 40 Statutes at Large 634, which appears at page 644 and is as follows: "*Provided*, That the Public Health Service, from and after July first, nineteen hundred and eighteen, shall pay to Saint Elizabeths Hospital the actual per capita cost of maintenance in the said hospital of patients committed by that Service";

The sixtieth paragraph under the head "Bureau of Fisheries" in chapter 113, 40 Statutes at Large 634, which is the fourth full paragraph appearing on page 694;

Sections 1, 3, 4, 6, and 7 of chapter XV of chapter 143, 40 Statutes at Large 845; The thirteenth paragraph under the head "General Expenses, Bureau of Chemistry" in chapter 178, 40 Statutes at Large 973, which is the second full paragraph appearing on page 992;

Section 2 of chapter 179, 40 Statutes at Large 1008;

Chapter 198, 40 Statutes at Large 1017;

Chapter 98, 40 Statutes at Large 1302;

The last paragraph under the head "Public Health Service" in chapter 6, 41 Statutes at Large 35, which is the sixth full paragraph appearing on page 45;

The proviso at the end of the first paragraph under the head "Public Health Service" in chapter 94, 41 Statutes at Large 503, which appears at page 507, and is as follows: "*Provided*, That the Secretary of the Treasury is authorized to make regulations governing the disposal of articles produced by patients in the course of their curative treatment, either by allowing the patient to retain same or by selling the articles and depositing the money received to the credit of the appropriation from which the materials for making the articles were purchased";

The second paragraph under the head "Public Health Service" in chapter 94, 41 Statutes at Large 503, which is the seventh full paragraph appearing on page 507;

The last paragraph under the head "Public Health Service" in chapter 94, 41 Statutes at Large 503, which is the seventh full paragraph appearing on page 508, and the substantially similar provisions in chapter 161, 41 Statutes at Large 1367, at page 1378;

The fourth paragraph under the head "Quarantine Stations" in chapter 235, 41 Statutes at Large 874, which is the eighth full paragraph appearing on page 875;

The third paragraph under the head "Public Health Service" in chapter 235, 41 Statutes at Large 874, which is the ninth full paragraph appearing on page 883;

Chapter 80, 41 Statutes at Large 1149;

The second paragraph under the head "Public Health Service" in chapter 23, 42 Statutes at Large 29, which is the thirteenth full paragraph appearing on page 38;

The proviso at the end of section 4 of chapter 57, 42 Statutes at Large 147, which appears at page 148 and is as follows: "*Provided*, That all commissioned personnel detailed or hereafter detailed from the United States Public Health Service to the Veterans' Bureau shall hold the same rank and grade, shall receive the same pay and allowances, and shall be subject to the same rules for relative



rank and promotion as now or hereafter may be provided by law for commissioned personnel of the same rank or grade or performing the same or similar duties in the United States Public Health Service";

The ninth paragraph under the head "Bureau of Mines", in chapter 199, 42 Statutes at Large 552, which is the fourth full paragraph on page 588, and the substantially similar provisions in chapter 42, 42 Statutes at Large 1174, at page 1210; chapter 264, 43 Statutes at Large 390, at page 422; chapter 462, 43 Statutes at Large 1141, at page 1175;

The last sentence of the paragraph under the head "Public Health Service" in chapter 258, 42 Statutes at Large 767, which appears at page 776 and is as follows: "The Immigration Service shall reimburse the Public Health Service on the basis of per capita rates fixed by the Secretary of the Treasury and the sums received by the Public Health Service from this source shall be covered into the Treasury as miscellaneous receipts";

The first proviso at the end of the ninth paragraph under the head "Public Health Service" in chapter 84, 43 Statutes at Large 64, which appears at page 75 and is as follows: "Provided, That the Immigration Service shall permit the Public Health Service to use the hospitals at Ellis Island Immigration Station for the care of the Public Health Service patients, free of expense for physical upkeep, but with a charge of actual cost for fuel, light, water, telephone, and similar supplies and services, to be covered into the proper Immigration Service appropriations; and moneys collected by the Immigration Service on account of hospital expenses of persons detained under the immigration laws and regulations at Ellis Island Immigration Station shall be covered into the Treasury as miscellaneous receipts";

and substantially similar provisions under the head "Public Health Service" in chapter 87, 43 Statutes at Large 763, at page 774; chapter 126, 45 Statutes at Large 162, at page 174; chapter 39, 45 Statutes at Large 1023, at page 1039; chapter 289, 46 Statutes at Large 335, at page 347; chapter 110, 49 Statutes at Large 218, at page 229; chapter 725, 49 Statutes at Large 1827, at page 1839; chapter 180, 50 Statutes at Large 137, at page 149; chapter 55, 52 Statutes at Large 120, at page 133; chapter 428, 54 Statutes at Large 574, at page 585; chapter 269, 55 Statutes at Large 466, at page 481; and Public Law 647, Seventy-seventh Congress, at page 22.

Chapter 146, 43 Statutes at Large 809;

The words "and public health" in the last sentence of section 7 (b) of chapter 344, 44 Statutes at Large 568;

The words "or public-health" wherever they appear in the second sentence of section 11 (b) of chapter 344, 44 Statutes at Large 568, as amended;

Section 3 of chapter 371, 44 Statutes at Large 622;

Chapter 625, 45 Statutes at Large 603;

The proviso at the end of the fifth paragraph under the head "Public Health Service" in chapter 39, 45 Statutes at Large 1028, which appears at page 1039, as is as follows: "Provided, That funds expendable for transportation and traveling expenses may also be used for preparation for shipment and transportation to their former homes of remains of officers who die in line of duty",

and substantially similar provisions appearing under the head "Public Health Service" in chapter 289, 46 Statutes at Large 335, at page 346; chapter 110, 49 Statutes at Large 218, at page 228; chapter 180, 50 Statutes at Large 137, at page 148; chapter 55, 52 Statutes at Large 120, at page 132; chapter 428, 54 Statutes at Large 574, at page 584; chapter 269, 55 Statutes at Large 466, at page 480;

Chapter 82, 45 Statutes at Large 1085;

The second paragraph under the head "Government in the Territories" in chapter 707, 45 Statutes at Large 1623, which is the seventh full paragraph on page 1644;

Chapter 125, 46 Statutes at Large 150;

Chapter 320, 46 Statutes at Large 379;

Section 4 of chapter 488, 46 Statutes at Large 585;

Chapter 597, 46 Statutes at Large 807;

Chapter 409, 46 Statutes at Large 1491;

Section 2 of chapter 656, 48 Statutes at Large 1116;

The ninth paragraph under the head "Public Health Service" in chapter 110, 49 Statutes at Large 218, which is the second full paragraph appearing on page 229;

Title VI of chapter 531, 49 Statutes at Large 620;

Chapter 161, 49 Statutes at Large 1185;

That portion of chapter 550, 49 Statutes at Large 1514, which reads as follows: "or of the United States Public Health Service";

The proviso at the end of the thirteenth paragraph under the head "Public Health Service" in chapter 725, 49 Statutes at Large 1827, which appears at page 1840 is as follows: "*Provided*, That on and after July 1, 1936, the Narcotic Farm at Lexington, Kentucky, shall be known as United States Public Health Service Hospital, Lexington, Kentucky, but such change in designation shall not affect the status of any person in connection therewith or the status of such institution under any Act applicable thereto";

The fourth paragraph under the head "Public Health Service" in chapter 180, 50 Statutes at Large 137, which is the sixth full paragraph on page 148;

Section 2 of chapter 545, 50 Statutes at Large 547;

Chapter 565, 50 Statutes at Large 559;

The first proviso in the paragraph headed "Division of Mental Hygiene" under the head "Public Health Service" in chapter 55, 52 Statutes at Large 120, which appears at page 134 and is as follows: "*Provided*, That on and after July 1, 1938, the United States Narcotic Farm, Fort Worth, Texas, shall be known as United States Public Health Service Hospital of Fort Worth, Texas, but such change in designation shall not affect the status of any person in connection therewith or the status of such institution under any Act applicable thereto:";

Chapter 267, 52 Statutes at Large 439;

Chapter 92, 53 Statutes at Large 620;

Chapter 606, 53 Statutes at Large 1266;

Chapter 636, 53 Statutes at Large 1338;

Section 509 of chapter 666, 53 Statutes at Large 1360;

Section 205 (b) of Reorganization Plan Numbered I, 53 Statutes at Large 1423; and

Chapter 566, 54 Statutes at Large 747.

Mr. BULWINKLE. I might say to you gentlemen on the committee that the cause of this is, last year when some bills were brought in here relating to the Public Health Service, that I investigated and found out some of those bills were to amend existing law, after looking further, I found out that the public-health laws were just a patchwork going back practically over 150 years; that some of the amendments to the law were put in on appropriation bills; and that the committee thought at that time—I think Mr. Reece, Mr. Brown, and Mr. Priest, and someone else besides myself, thought that the best thing to do was to have a codification, so that we would know what the public-health law was. Accordingly, the attorneys, Mr. Perley, representing the committee, of the Legislative Counsel's Office, and Mr. Calhoun, and Mr. Wilcox, and others besides the Public Health officials, Dr. Parran, and Dr. Thompson have been working on the bill.

For that reason we thought we would go into it carefully and we will have the information. My idea was, if it meets with the committee's approval, to have Dr. Parran as the first witness, and he would be followed by Mr. Calhoun, who is now in the Navy, and Mr. Wilcox, another attorney.

If that meets with the approval of you gentlemen, we will proceed along that line.

Dr. Parran, Surgeon General of the Public Health Service.

**STATEMENTS OF DR. THOMAS PARRAN, SURGEON GENERAL; DR. L. R. THOMPSON, ASSISTANT SURGEON GENERAL, UNITED STATES PUBLIC HEALTH SERVICE; AND ALANSON W. WILCOX, ASSISTANT GENERAL COUNSEL, FEDERAL SECURITY AGENCY**

Dr. PARRAN. Mr. Chairman and members of the committee, as you have stated, the laws of the Public Health Service represent a patchwork with successive overlapping layers, as the Congress during the

period since 1798 has imposed additional powers and duties upon this organization. This became particularly apparent when the chairman introduced H. R. 649, on January 6, 1943.

We have been very glad to have the opportunity of attempting a codification of the public-health laws. However, as the war situation developed following the introduction of H. R. 649 and a companion bill in the Senate, S. 400, it became apparent that the Public Health Service was urgently in need of certain of the provisions relating to the reorganization, in order to enable it to carry forward the added responsibilities of wartime. As a result of this the subcommittee took up S. 400 and with amendments it was passed and became a law on November 11, 1943, as Public Law 184.

I mention this, Mr. Chairman, because the code as drafted was drafted prior to the passage of Public Law 184.

The law gives in general terms and by reference certain rights and benefits to Public Health Service officers, particularly in wartime. It, therefore, might seem appropriate to have those added provisions spelled out by further amendments to H. R. 3379, which is now before you and which was drafted prior to the passage of Public Law 184.

I should like, Mr. Chairman, to pay tribute to the legal counsel whose names you have mentioned for the tremendously difficult and arduous job which faced them in attempting to codify this huge body of law; some of it active; some of it perhaps repealed; conflicting provisions and other complications, which I had not realized until the lawyers got into the job.

This proposed code, Mr. Chairman, accomplishes six major purposes.

For the first time it brings together the various laws under which the Service has been functioning since its inception in 1798.

Second, it reenacts into law those phases of these laws which are still active and permanent.

Third, it eliminates the laws or part of laws which in development of the Service have become obsolete.

Fourth, it eliminates many inconsistencies in language in different laws.

Fifth, it broadens certain authority which at present has been found too restrictive or not in accord with present administrative needs.

Sixth, it allocates authority to make regulations between the President, the Administrator, and the Surgeon General, depending upon the importance of and the content of such regulations. Parenthetically I may say that in the present laws, the President is required in some instances to make regulations dealing with relatively minor matters, while in other instances, the Administrator or the Surgeon General is authorized to make regulations dealing with more important matters.

Mr. REECE. Mr. Chairman, I was called out of the room, and, therefore, I missed a part of your statement; but you have touched upon what I had in my mind. Not having yet had an opportunity to make a comparative study of the bill and the present law, and in the statement, you have stated that the law is broadened. Now, someone is going to explain the manner in which this varies from the present law?

Dr. PARRAN. We shall be prepared, Mr. Reece, to present those facts in detail. I shall be very glad to do it, or the lawyers who have drafted



the code will be prepared to do it. In fact, we wish to put into the record a complete statement of every broadening of authority; or change in existing law.

Mr. REECE. This is not just a codification?

Dr. PARRAN. It is primarily a codification, but not solely a codification.

Mr. REECE. I think it is very important that any broadening of authority or any new regulation be emphasized so that we will know just what we are doing. Congressman Keefe talked with me yesterday, not as a member of the subcommittee, because I do not know that he knew I was a member of the subcommittee, but in an incidental way, about his views, and I think possibly he had talked with you.

Dr. PARRAN. I talked with him yesterday; yes.

Mr. REECE. I would like to have also that matter touched upon when you have reached that point, if you do not mind.

Mr. BULWINKLE. I might say, Mr. Reece, if you will pardon me, that it is the intention to show every change in existing law; whether it takes from existing law or adds to it; so that we can have a full and complete knowledge of what will be before us. It will be written out before we get into it.

Mr. REECE. If I may say off the record, Mr. Chairman.

(After informal discussion off the record:)

Mr. BULWINKLE. All right, Doctor, you may proceed.

Mr. REECE. Still thinking out loud, at some point in the proceedings I would like to have a comparative print, one showing the existing law and another print showing the new law, for ready reference.

(After further informal discussion off the record:)

Mr. BULWINKLE. All right, Doctor, you may proceed.

Dr. PARRAN. Mr. Chairman, in connection with drafting the code, even though it were solely a codification of law and introduced no new principle of legislation, it would have seemed poor draftsmanship to have repeated verbatim some of the present provisions of law, because in a number of instances two different laws are written in different words to accomplish the same objective and the wording of neither one is good from the standpoint of legal drafting. Therefore, as I have indicated, a certain amount of clarification has been attempted and in each section where that has been done, it will be indicated.

Mr. REECE. I think that is all right. I am not taking any exception to that; neither am I taking any exception to at the appropriate time or in the appropriate way broadening certain authority or enacting what might amount to new legislation to round out the public health laws. So what I am now stating is not by way of criticizing anybody for what has been done, but rather by way of caution, particularly.

I want to know for one thing what we are doing when we do it.

Dr. PARRAN. We shall attempt to explain very fully both our attempts at clarification and of the new authority which has been inserted.

The code is divided into titles dealing essentially with different subject matters.

Title I includes definitions. I would invite attention there to the fact that the Virgin Islands are added to the term "State" in connection with grants-in-aid. Other legislation is pending—I am not aware of its present status—which would bring the Virgin Islands under the



provisions of the grants-in-aid program for certain public health purposes.

The Virgin Islands are now included in our grants-in-aid for venereal disease control, but not other public-health purposes. That is a change in existing law.

It is an attempt to harmonize the territory covered by two of our operations which have essentially the same purpose, namely, aid to the States in the improvement of public health.

I think there are no other terms which are defined in title I which need comment.

Title II deals with administration.

Mr. REECE. Now, what is the scope of the public health activities in the Virgin Islands at this time? Does it go beyond venereal-disease control?

Dr. PARRAN. Only that and the operation of a relief station for legal beneficiaries, and the operation of a quarantine service.

Mr. REECE. What does the Service have in mind now with reference to the inclusion of the Virgin Islands?

Dr. PARRAN. Under the Venereal Disease Control Act, we give six or seven thousand dollars out of the total appropriation to aid the territorial health department there in control of venereal diseases. As the amendment is written it is expected that about the same amount would be allotted to the Virgin Islands for general public health purposes out of title VI of the Social Security Act.

Mr. REECE. Then to do what you have in mind it is not necessary to make a change in the definitions?

Dr. PARRAN. It is, insofar as title VI of the Social Security Act is concerned.

We have two major grants-in-aid provisions, Mr. Reece. One relates to the venereal disease appropriation of \$12,300,000 and the other an appropriation for general aid to public health in the States—local health departments, and sanitation and public health, nursing aid—the whole general public health program, such as is carried on in the State or local health departments.

That authority is in title VI of the Social Security Act. The current appropriation is \$11,000,000.

Under this definition and later language, it would be proposed that the Virgin Islands would share in both rather than in one of these, because the small appropriation, the amount involved, as I say, is less than \$10,000 a year.

Title II—Administration: I should like to emphasize that in this title, and throughout the code, the Public Health Service is continued under the supervision and direction of the Administrator of the Federal Security Agency. All of the laws passed prior to 1938 refer to the Secretary of the Treasury, since the Public Health Service was then in the Treasury Department. An attempt has been made to continue the same administrative relationship and even to clarify and strengthen the administrative relationship between the Federal Security Administrator and the Public Health Service. Pursuant to that general philosophy there will be a few minor amendments, clarifying amendments, which will be submitted. The first, for example, is at the bottom of page 3, line 25, which reads: "The Surgeon General is authorized and directed" to perform certain functions in reference to reorganization.

We should like to suggest that consideration be given to adding the words after "The Surgeon General," the provision, "under the supervision and direction of the Administrator," the same phrase which appears in section 201 in line 20.

In general, Mr. Chairman, the language of title II carries forward existing law.

When the code was drafted, Public Law 184 had not been passed, but with minor exceptions which will be pointed out later, all the provisions of title II merely clarify and continue existing authority in law.

MR. REECE. Not that it relates particularly to this matter, but section 204 has a provision that is common to all of the services, where the chief of the service is not to be reappointed, he reverts to his former rank in the service, and without expressing an opinion, I have felt that that does not work out right in the Army or the Navy, and I should think the Public Health Service. It is hardly compatible for the chief of the service to go back, it seems to me, and take his former rank, after having served as chief of the service.

The result was that in the Army and the Navy a provision was made so that the chief of the service, without doing that, could retire, which most of them have done in peacetimes, because of the incompatibility of occupying their former rank, and I have felt that if the organization could be rearranged in some way so that these former chiefs of services could occupy a position somewhere between the former service and the chief of the service, some special provision could be made for them, it would be in the interest of the service and I am wondering if you have given any consideration to that? It probably does not apply as much to the Public Health as it does to the Army and Navy, where there are so many more of the chiefs of services involved.

Dr. PARRAN. As a matter of fact, we have done so, Mr. Reece, and at one time such language was drafted. I think there was no crystallized opinion among those who were drafting the law as to which provision should be made—for obvious reasons I took no active part in the discussions. Personally it would be equally agreeable either way.

I think that following passage of Public Law 184, in which Public Health Service officers are entitled to certain benefits which are now provided to medical officers of the Army, there is more reason for copying the Army procedure. In fact, perhaps inferentially the right might be had now by a Surgeon General of the Public Health Service to retire in a higher grade. I believe the Army law provides that an officer who has served at least 4 years in an advanced rank as the head of one of the major administrative divisions is entitled to retirement at that advanced rank.

We would have no objection to the committee giving consideration to a comparable provision—in fact, I think language has been drafted.

MR. REECE. I think—I am inclined to think that would be very good. And then I am inclined to think there should also be some inducement and provision made for that officer to remain in the service at an increased rate, if he should desire to, on active duty. That is, we should create an inducement for him to remain in the service rather than provide for him to go out of the service by way of retirement, after having had this additional experience.

I have never felt that it was quite compatible for the Surgeon General of the Army to have to revert to colonel if he chose to remain on active duty, and the same thing relates to the Surgeon General of the Public Health Service or any of the other services. That is, we ought to make some provision by which we could continue to have the advantages of their services in an appropriate grade—I mean, a grade that would be compatible to them.

I am not asking you necessarily for an opinion on it, but I think we ought to do something more than to make a provision for them to retire.

If they do retire, I think the Public Health Service ought to be placed in the same category in that respect as the Army, for example.

Mr. PRIEST. Mr. Chairman, I want to endorse in general what Mr. Reece has said on that. I had given that one phase of the legislation some little thought myself, and particularly I agree with the position taken by Mr. Reece, that there should be some inducement to keep these men who have served in these administrative positions in the Service if they desire to remain. At least there should be some inducement to cause them to want to remain in, in order that the Nation and the Service might benefit from that experience. I hope we may get around to an amendment along that line as we proceed with this legislation.

Dr. PARRAN. I thank the gentlemen for the views they have expressed.

Mr. Chairman, the provisions of Public Law 184 are working out very well in enabling us to consolidate the activities of the Service in the four major administrative units and two major divisions. They are:

- Office of Surgeon General.
- National Institute of Health.
- Bureau of State Services.
- Bureau of Medical Services.
- Division of Sanitary Engineering.
- Division of Dentistry.

The various sections of title II dealing with the commissioned corps of the Public Health Service are, in the main, the reenactment of existing law, especially the authority contained in the act of April 9, 1930. The grades, relative rank, and pay within the grades have been established since the first joint service pay bill of 1922, and reaffirmed by Congress in the pay bill of 1942.

One new provision is incorporated in this title, and that is the permission for the President to make temporary promotions of officers at any time to perform special temporary tasks. This authority would be used only in times of war or during peace when special emergencies arise, such as floods or epidemics. The provision to which I refer is contained in section 207 (a).

Mr. Chairman, this might be as good a time as any to say that since the code was drafted, further consultations have been had in the Federal Security Agency and with the Bureau of the Budget. As a result, in this title in one or two places and in other titles, further amendments will be suggested. I believe, however, that unless you have questions as you go along on existing provisions, with your permission, I should like to pass them over and have Mr. Wilcox



take them up perhaps with a letter from the Bureau of the Budget which I hope will be here tomorrow.

Mr. BULWINKLE. Very well.

Dr. PARRAN. I should like to emphasize the importance of the Reserve Corps of the Public Health Service. This was established under the act of 1918, at the time of the Nation-wide influenza epidemic. It was passed largely in recognition of the need for a broadening of the functions of the Service to meet emergencies of that type.

Our problem in the Public Health Service is somewhat different from that of the Army and Navy, which needs to call upon its reserve for war. The Public Health Service may be confronted in peacetime, as well as wartime, with extraordinary demands upon it. For example, now our Reserve Corps on active duty far outnumbers the Regular Corps. There are some 600 Regular officers and 1,580 Reserve officers on active duty. An additional group of 2,000 Reserve officers are on inactive duty.

The Reserve officers are serving on duties comparable with those of Regular officers with the Coast Guard, with the Army, with States in connection with emergency health and sanitation activities, and in various other capacities, some of which I enumerated in testimony when the reorganization bill was under consideration by this committee.

Public Law 184 gives to the Reserve officers in time of war essentially the same rights and privileges as are given to our own Regular officers and to officers of the Army and Navy.

It would be desirable to "spell out" these benefits in amendments to the pending code. I think Mr. Wilcox will suggest such amendments to this end.

My purpose in mentioning the matter at this time is to emphasize the importance of the Reserve Corps both in war and peace to the total operation of the Public Health Service.

The Reserve Act provides that the Reserve Corps is for use in times of national emergency, but Reserve officers are subject to call to active duty at any time. Actually, we have had some Reserve officers on duty every year between 1918 and the current war.

Attention should be drawn to the fact that our two advisory councils which are continued—the National Advisory Health Council and the National Advisory Cancer Council. The work of these councils has been of great value to the scientific problems of the Public Health Service, and we hope that they will be continued.

There is one specific amendment which I should like to suggest at this time. On page 17, section 214 (b), through an inadvertence the language there was not as carefully drawn as we would wish. It provides that—

upon the request of any State, or political subdivision thereof, personnel of the Service may be detailed by the Surgeon General for the purpose of assisting such State or political subdivision in work related to the functions of the Service.

The amendment which I should like to suggest would be as follows: "Upon the request of any State" scratch the words "or political subdivision thereof" and insert "health authority."

Such an amendment would safeguard the problem which was brought to the attention of this committee by Mr. Keefe, for example; and this same suggestion also has been brought to us by a number of State health officers. Our intention is to continue our present law



which provides that our personnel shall not be assigned to a State, except on request of the State health authority, although they may be assigned for duty in a local political subdivision. We would wish the amendment to be made as I have indicated.

Unless there are questions, Mr. Chairman, may I pass to title 3, which is of considerable importance?

Part A deals with research and investigations.

From the early days of the Service in 1878, when Congress began the enactment of Federal quarantine acts, the research authority of the Service has always been very broad. In 1901 specific authority was granted for the investigation of infectious and contagious diseases and matters pertaining to the public health. Again in 1912 this authority was reiterated and broadened to provide—I think the exact words are that “the Public Health Service is authorized to study the diseases of man and conditions pertaining thereto, including the pollution of navigable streams, lakes—” and other specified purposes. An attempt has been made in this title to elaborate but not to extend existing research authority; to elaborate present research authority by describing in more detail the methods which are to be used to accomplish the stated objective.

In other words, this is a delineation of existing authority.

In the language of section 301 there is one broadened purpose, which is contained in the authorization to establish fellowships. At present the Public Health Service is authorized to establish fellowships for the study of cancer. That device has worked extremely well. We should like favorable consideration to the broadening of that authority so as to include fellowships in other phases of research being carried out by the National Institute of Health.

Mr. PRIEST. General, may I ask just one question there for information? How many of these fellowships have been authorized and are now effective?

Dr. PARRAN. Since the enactment of the Cancer Institute Act of 1939 there have been approximately 30 or 35 such fellowships.

Mr. PRIEST. I was just interested in knowing.

Dr. PARRAN. May I correct the figure if I am a little off, but I think that that is approximately correct?

Mr. PRIEST. Yes.

Dr. PARRAN. These fellows are promising young scientists who are given appointments on an annual basis, generally speaking, a temporary basis, and brought into the National Cancer Institute for research work, or they may be sent to some other research institution for research and study.

We hope that present authority would be continued to assign them also to research institutions outside of the country for further investigation in order to bring back to us the best knowledge that may be had.

Mr. REECE. Do these fellowships all go to citizens of our country?

Dr. PARRAN. There is an interesting legal situation in that respect, Mr. Reece. The National Cancer Institute Act specifically provided that fellowships should be available to the most competent research scientists in this and other countries. A few months after the passage of that act, a general prohibition against the employment of non-citizens was contained in an appropriation act. As a result, all of

such appointments have been given to citizens. The provision of the Cancer Institute Act, in other words, was modified by a later provision in an appropriation act.

Mr. REECE. My inclination would be that this ought to be made an exemption to the general provision. For one, I would rather like to see some of the staff give attention to drawing an amendment for that purpose.

Dr. PARRAN. As a matter of fact, we were negotiating with a Nobel prize winner immediately after the passage of the National Cancer Council Act, but it was necessary to cancel our negotiation when the prohibition was enacted in an appropriation act that year.

Mr. PRIEST. Pardon me. That prohibition is only effective during the actual life of that particular appropriation bill, unless it is reenacted; is it not?

Mr. REECE. That all depends. I do not recall that particular amendment.

Mr. PRIEST. I agree with Mr. Reece that in this case particularly I would like to see such a prohibition lifted. I think it should be lifted.

Dr. PARRAN. May I point out in the same section, 301, a further broadening of authority in 301 (d), we propose to make grants in aid to universities, hospitals, laboratories, and other public or private institutions. The wording of section 301 (d) would extend the authority as regards cancer, under the same safeguards, to all other types of research which the Public Health Service is carrying out. This is a very important and much-needed extension of present authority.

There is being built up in this country the very finest relationship in connection with cancer research between the scientific institutions and the Public Health Service. It has furnished a pattern which I hope may be continued and expanded in respect of other research problems with which we are faced.

There is nothing else in section 301 which represents any expansion of existing law.

Part B of title III deals with the very important function of Federal-State cooperation. As a background, may I say that I think the relationship which the Public Health Service and the State health departments jointly have worked out over more than a generation represents a very fine pattern and one which in general we hope will be continued and perfected. The attempt has been made, therefore, in this part of the title to accomplish that objective.

We have been faced in the problem of drafting with the fact that two major grants-in-aid programs are carried on under different legal wording. Title VI of the Social Security Act authorizes a flat appropriation of \$11,000,000 for grants to the States for public health work.

Mr. BROWN. Dr. Parran, is that an increase over the present appropriation?

Dr. PARRAN. That is no definite increase, Mr. Brown. I was just about to point out that in attempting a codification, it was felt that it would be desirable, if possible, to harmonize more closely the language of the Venereal Disease Control Act, of 1938, and title VI of the Social Security Act of 1935. As drafted, the limit of \$11,000,000 is eliminated from title VI of the Social Security Act. The committee may wish to consider that as a matter of policy.

Mr. REECE. Where is the present provision to which you refer?

Dr. PARRAN. Section 314 (d) at the bottom of page 26—

there is hereby authorized to be appropriated for each fiscal year a sum sufficient to carry out the purposes of this subsection.

I think it will not be necessary to refer to 301 (a), because that, except for certain wartime authority, is essentially the same as the venereal disease control authorization; but 301 (b)—

Mr. REECE. Have appropriations made heretofore been sufficient for the purposes of that work?

Dr. PARRAN. The Social Security Act of 1935 authorized an \$8,000,000 appropriation. In 1939 that was increased to \$11,000,000, thereby expanding the program.

Mr. REECE. Did you use all of it?

Dr. PARRAN. Yes, sir; all money with exception of minor balances have been used every year.

Mr. REECE. Was that sufficient?

Dr. PARRAN. It depends really upon one's concept of how far the Federal Government should go in dealing with new public health problems in applying our knowledge more fully for the control of disease throughout the country.

If we assume that our Federal assistance to the States should expand to deal with conditions which were controllable through newer knowledge of science, then I would say that it has not been sufficient. It has been of tremendous value, however, in improving public health work throughout the country.

My comment about the need for expanding Federal assistance into fields where science has given us better tools with which to work is illustrated by the problem of tuberculosis. In this field in recent years new knowledge has been gathered which makes it possible and economical, within a measurable time, to eliminate tuberculosis as a public health problem in this country. That will require substantial appropriations, Federal and State, but measurable appropriations.

Mr. REECE. Does this section include the venereal disease control?

Dr. PARRAN. Section 314 (a) includes the venereal disease control work, and section 314 (b) expands the present provisions of title VI of the Social Security Act, plus two additional activities which we now are carrying out under other laws. I refer to the purposes as stated, beginning in line 12, to "prevent and control the spread of communicable diseases in interstate traffic." That authority is an ancient one which the Public Health Service has exercised and has been carried quite apart from the Social Security Act, but since its purpose seems to be the same as our general purpose in aiding the States in improvement of public health, it would seem appropriate to put it in this section.

Also there is the authority to—

conduct health and sanitation activities in (A) areas adjoining military and naval reservations; (B) areas where there are concentrations of military and naval forces; (C) areas adjoining Government and private industrial plants engaged in defense work; and (D) Government and private industrial plants engaged in defense work.

That authority is now carried in annual appropriations under the title "Emergency Health and Sanitation."



In line 19 there is authority to—

meet the cost of pay, allowances, and traveling expenses of commissioned officers and other personnel of the service detailed to assist States,

and in line 22—

for administration.

In other words, there has been put into section 314 language which expands considerably present language of title VI of the Social Security Act, but it is essentially the same language as is contained in the Venereal Disease Act.

Mr. BROWN. Dr. Parran, is it your suggestion that all of these things should be done as a permanent policy? In other words, that your office should have control of and supervision of health conditions in areas adjoining military and naval reservations at all times; that is, in peacetimes. Adjoining private and Government industrial plants engaged in defense work—I do not know just what that means.

Dr. PARRAN. This language is carried, as I say, almost verbatim in the present annual appropriation bill. We conceive that this language is self-limited. When there are no longer any large defense contracts and no longer any large concentration of troops, it would become inoperative although the authorization would remain.

Mr. BROWN. How will it become inoperative? We will always have some troops in some areas. I am speaking, for instance, of Fort Thomas which has been a permanent little post down across the river from Cincinnati. It is certainly adjacent to Cincinnati, but I do think that Cincinnati has a pretty fair public-health service of its own and that probably three or four hundred men stationed at Fort Thomas should not control the health conditions of that area.

Dr. PARRAN. I should expect, Mr. Brown, that such minor needs as that would continue to be met as now, through our grants-in-aid. We are doing such work now through grants-in-aid under title VI, except where the problem is beyond the ability of the local authorities to handle.

We had in mind one problem which will need attention even after the war is over and that is, many soldiers and sailors will be returned to this country with malaria in quiescent stages and that disease will become reactivated and will represent a threat to many areas in starting epidemics.

Mr. BROWN. That will be taken care of by the Veterans' Administration.

Dr. PARRAN. The Veterans' Administration can give them hospitalization, but the Veterans' Administration has neither the authority nor the facilities to clean up malaria in a 2-mile zone, let us say, around such hospitals. We are doing some work on that now.

Mr. BROWN. Has there been any spread of malaria as a result of the return of soldiers from the Pacific as the result of furloughs?

Dr. PARRAN. I think, sir, that has been prevented up to now possibly through the efforts of the Public Health Service working with the States in the area by controlling mosquitoes in areas surrounding the places of the hospitalization of such persons; also by similar control activities around camps for prisoners of war, to prevent such spread of malaria.



The great problem, of course, will come when these boys come back on furlough.

Mr. BROWN. That is what I am talking about. Has there been any spread?

Dr. PARRAN. As yet we have not seen any outbreaks of malaria. We expect to see them. But, thanks to the advance interest of the Congress, we hope we shall be prepared to deal with it and that we expected not—

Mr. BROWN. But actually there have not been any specific outbreaks of malaria as the result of the return of these men on furloughs home, as yet?

Dr. PARRAN. We have not had any. We have had it as a result of migration of labor from malaria-infected areas to noninfected areas.

Mr. BROWN. Such as from the South to the North?

Dr. PARRAN. Yes.

Mr. BROWN. Well, I am thinking particularly of the soldiers.

Dr. PARRAN. We have not yet had any such epidemics as a result of the joint work of the military forces, ourselves, and the States.

Mr. BROWN. Have you had any instances where the Army or Navy forces have sent men out into civilian life on furlough who might carry malaria?

Dr. PARRAN. The answer to that question must be "Yes," because nobody can tell who a malaria carrier may be. Nobody knows when a case of malaria may develop or recur in a person who has had the disease.

Mr. BROWN. Ordinarily are they not rather closely checked and are they not reasonably certain, at least, that they do not have it in a contagious state?

Dr. PARRAN. Every possible check is made, but even with the best checks it is not possible to say that every soldier does not have latent malaria.

Mr. SCOTT. Is it not a fact that a change in climate is likely to reactivate malaria?

Dr. PARRAN. That frequently happens.

I have nothing but praise for the splendid job which the Army and the Navy both are doing in connection with this problem.

Mr. REECE. How do venereal disease infections in this war compare with that of the other World War?

Dr. PARRAN. I have no reports on the rates among troops overseas. They are in very different and perhaps more dangerous places in this war than in the last war.

In general one can say that in this country the rate has been very much less than the last war. Just about the onset of the war in 1941, and the first half of 1942, there was an increase over the previous peacetime rate. That increase, however, has continued to go down so that generally speaking the rates now are at an all-time low among troops in this country.

Mr. REECE. I think that is a more important public-health work than some of the other.

Dr. PARRAN. I think it can be said that our results in the control of venereal diseases during the first 2 years of the war have not been paralleled by any nation at war at any time. Traditionally venereal diseases have become epidemic in wartime. I believe that in this war up to now we have been able to hold the line, at least, against any increase.

Mr. PRIEST. Mr. Chairman, I would like to ask one question in general reference to the language in section 314 (a). I notice in that section the language discussed back in 214 (b) is repeated with reference to States or counties or political subdivisions thereof; but it also contained the language as otherwise provided.

The question is Would the amendment as suggested in 214 (a) take care of that section and make it unnecessary to amend this section also?

Dr. PARRAN. Mr. Priest, the problem you mention is taken care of on page 27 under paragraph (c), in which it is specified that the total sum which must be allotted to each State is determined.

Mr. PRIEST. Yes.

Dr. PARRAN. In other words, the allotment is to the State. The purpose is to assist both the State health department and the local political subdivision.

Mr. PRIEST. Thank you.

Mr. REECE. Have you had any difficulty getting sufficient appropriations for carrying out the provisions of this section?

Dr. PARRAN. Of the venereal-disease section?

Mr. REECE. Yes.

Dr. PARRAN. Congress has been very generous in increasing the amounts from the initial appropriation of \$3,000,000 to the current appropriation of \$12,300,000.

Mr. REECE. Has that been sufficient?

Dr. PARRAN. Yes, sir; with a very considerable addition which is provided as a temporary wartime activity, namely, the cost of caring for infected persons, especially prostitutes, in what we call rapid-treatment centers in various States. That fund represents chiefly an additional aid of the Federal Government under the Public Works Agency, the Lanham Act, in providing for the physical facilities and the maintenance of patients in what might be called quarantine hospitals.

Mr. REECE. Have the funds which were obtained from the Lanham Act all been used in connection with or for the purpose of maintaining facilities for the treatment of diseases?

Dr. PARRAN. Yes, sir; all of the funds which have been obtained for this general purpose have been so used, and in most instances the fund is not given to the Public Health Service, but is granted to the States—the State or local health agency. In a few instances it is given to us where the State finds it is not possible under its laws to establish and operate such institution.

Mr. BROWN. Mr. Chairman.

Mr. BULWINKLE. Mr. Brown.

Mr. BROWN. Dr. Parran, I notice in section (c), or paragraph (c) of section 314, page 27, there is set forth three ways in which the funds are allotted to the various States: First, population; second, the size of the venereal-disease problem, and the size of other special health problems; and third, the financial need of the respective States.

How do you fix the financial need of the State?

Dr. PARRAN. Mr. Brown, that language, I should say, is an exact repetition of the language in the present Venereal Disease Control Act. We have tried several yardsticks of financial need—per capita income has been, I think, the most reliable, where that figure can be gotten currently.

Mr. BROWN. Per capita income?

Dr. PARRAN. Yes, sir.

Mr. BROWN. Regardless of what funds the State may have available?

Dr. PARRAN. I am uncertain whether we have tried to weigh the amount of funds which the States have available. I think not, because the picture at the moment is changing very fast and the amount of funds available may vary, not depending upon the fundamental needs of the State, but upon whether or not a particular State is a spendthrift or not at the particular time.

This is a very difficult problem to determine exactly, as I think all of us realize.

Mr. BROWN. Of course, if the State had a high per capita income and was not spending much money on this particular thing it might create a health condition, while some States with a lower per capita income would be appropriating a great deal of money for it and would not need much help.

Dr. PARRAN. Perhaps not a good answer from your point of view, but a practical answer to our problem has been this: We have discussed the formula as the law provides with conferences with State health officers every year before the regulations are made under which the allotments are granted and have had an agreement from a meeting of the State health officers as to the justness of the formula which we are using.

Mr. BROWN. And that has been satisfactory to all States, has it?

Dr. PARRAN. It has been.

Mr. BROWN. And does your Service take the attitude that wherever possible the State should carry this load?

Dr. PARRAN. By all means; and in that connection we are suggesting in this title that the present broad authority given to the Surgeon General be somewhat restricted.

I should like to refer to that when we come to it.

Mr. Chairman, in reference to section 314 (b) there may be a recommendation from our lawyers suggesting changes to meet the point which Mr. Brown has raised, namely, the permanence of health and sanitation activities in connection with military areas.

Mr. BROWN. And defense work.

Dr. PARRAN. Second, as to the amount of money, that is something which perhaps the committee itself would wish to consider and give us instructions on.

Mr. BROWN. That will also pertain, will it not, to (C) to areas adjoining private industrial plants?

Dr. PARRAN. Oh, yes; to all of it.

Mr. BROWN. The entire section?

Dr. PARRAN. No, (2) beginning in line 13 and ending in line 19.



(The language referred to reads:)

(2) conduct health and sanitation activities in (A) areas adjoining military and naval reservations, (B) areas where there are concentrations of military and naval forces; (C) areas adjoining Government and private industrial plants engaged in defense work, and (D) Government and private industrial plants engaged in defense work.

Mr. Chairman, on page 28, same section, 314 (f) is new language. It is about the same language as we now have in the regulations made pursuant to the existing law. No reference is made, although there is implication, that the States themselves should put in some money, and so that idea is put into the law, although the amounts of money to be paid are not specified.

Mr. BROWN. Is that a new provision?

Dr. PARRAN. It is a new restrictive provision. The present law is more wide open than this.

Mr. BROWN. You know, Doctor, we have had a lot of complaints from a lot of States that the Federal Government is constantly controlling State activities by extending or withholding funds. I am just wondering if that is a good provision, and if you have really given it considerable thought.

Dr. PARRAN. I may say that such requirement is now made.

Mr. BROWN. I thought you said it was a new provision?

Dr. PARRAN. In general we have been able to secure several dollars of local and State money for every dollar of Government money that has been put in. The intent of our present law seems to be that the States should make some contribution of their own and we have had such provision in the regulations.

Now, if the Congress wishes to change that policy, there is the place where such matter needs to be considered.

Mr. BROWN. This does not require matching of funds, as I understand it, but whatever you determine is necessary?

Dr. PARRAN. Yes, sir.

Mr. BROWN. Which is better, of course, than the arbitrary feature of matching.

Dr. PARRAN. And it gives the Surgeon General some backing in asking for funds as now is done in the regulations.

Subsection (g) also is new language. It repeats essentially the provisions of the regulations; but I would prefer, and the Service would prefer, to have the mechanism for review of the efficiency of the work of the health authority set forth in law rather than to carry that responsibility entirely by regulation.

This is intended to provide an orderly way under which payments may be withheld from a State for misuse of funds or failure to comply with provisions of the law.

I think that is all as regards section 314.

Section 315 essentially repeats the present authority of the Public Health Service in regard to health education, the basic act, regarding making sanitary reports and health conditions, and so on, dealt with publications. The words "or otherwise" are used because obviously motion pictures, radio, or other means of public education are appropriate.



If there are no questions, Mr. Chairman, on part B, we come to part C of title III, beginning on page 30, which relates to hospitals, medical examinations, and medical care.

Mr. BULWINKLE. May I ask you, just for my own information, Doctor, as well as for the record, to just explain what hospitals you have control of now?

Dr. PARRAN. The Public Health Service from the beginning, from its origin, has been responsible for the medical care of certain persons designated by law as being entitled to such care. The first group were merchant seamen of the United States who were given care for the payment of a compulsory health-insurance tax of 20 cents a month which was imposed under the act of July 1, 1798. In the next year that tax was extended to sailors in the United States Navy and the first medical care given to personnel of the United States Navy was given in the marine hospitals of the Public Health Service.

The personnel of the United States Coast Guard has continued from the beginning to be beneficiaries of the Public Health Service.

Mr. BULWINKLE. Well, the Public Health continued to take care of the hospitalization of the Navy until 1842 or 1843—somewhere in there—did it not?

Dr. PARRAN. It began in 1799. The law imposed a tax upon the sailors of the United States Navy and entitled them to care in the marine hospitals. I think it was following the War of 1812 that a separate arrangement was made.

Mr. BULWINKLE. They did not have a regular medical corps in the Navy until about 1842, did they?

Dr. PARRAN. I am not sure of that, Mr. Chairman; I am not sure of that date. I will put a brief statement in the record, if I may, if you wish to have it.

Mr. BULWINKLE. Very well.

(The statement is as follows:)

The Medical Department of the United States Navy was established by an act of Congress of August 3, 1842, reorganizing the Navy Department, in which the various bureaus were created and the management of the Medical Department was vested in a single head denominated as Chief of the Bureau of Medicine and Surgery. It was required that this officer should be chosen from the surgeons of the Navy on September 1, 1842. William P. C. Barton was appointed the first Chief of that Bureau.

Dr. PARRAN. As I was saying, part C of title III is in the main a reenactment into law of present widely scattered authority, some of it very ancient. To the already authorized beneficiaries of the Public Health Service there now is proposed to be added enrollees of the United States Maritime Service and members of the Merchant Marine Cadet Corps and as worded also employees of the Public Health Service taken sick in line of duty.

At present we are caring for the personnel of the Maritime Service and the Merchant Marine Cadet Corps on a reimbursable basis. Since they essentially are sailors, or at least embryo sailors, it seemed desirable to name them as beneficiaries.

Mr. BULWINKLE. How many hospitals do you have?

Dr. PARRAN. We have 26 marine hospitals and a considerable number of so-called second-class relief stations which are essentially clinics

or dispensaries—out-patient clinics. We have contracts with some civilian hospitals in the smaller places where beneficiaries are cared for on a per-diem basis.

Those 23 marine hospitals have a capacity of about 6,500 beds.

In addition, the Public Health Service operates two narcotics hospitals of 1,000- to 1,100-bed capacity each, one at Lexington, Ky., and another at Fort Worth, Tex.

Included in the total of marine hospitals are two specialized institutions, one the National Leprosarium at Carville, La., and our tuberculosis sanatorium at Fort Stanton, N. Mex.

MR. BROWN. Doctor, may I just refer back for one moment to ask you a general question. I think it is rather important, and I want to ask it before it slips my mind.

Has this bill, or proposed code, been submitted to the various States or State health associations or organizations for their study and review and suggestions?

DR. PARRAN. It has, Mr. Brown, in this way: The State health officers have a committee which is responsible for all Federal relations. We had hoped that the chairman of that committee would be here today. He will not be able to come; but he is sending a member authorized to speak for the committee, and before the hearings are over will file a statement concerning this code which I am sure will approve the provisions with one or two amendments, to which amendments the Public Health Service is agreeable.

MR. BROWN. So that it will be in a position where this legislation will have the benefit of the study and the approval of the various States?

DR. PARRAN. That is correct.

MR. BROWN. I think that is very important, Mr. Chairman.

DR. PARRAN. Mr. Chairman, I invite attention to section 322 in which there is listed the persons entitled to care in accordance with the regulations in hospitals and other stations of the Service, so-called beneficiaries. I have mentioned two new classes.

Our present law, dating back many years, provides that field employees of the Public Health Service, when taken sick or injured in line of duty, shall be entitled to medical care in hospitals of the Public Health Service. That has made a difference between the departmental and the field personnel. At the moment the National Institute of Health is a field station. The Public Health headquarters is located adjacent to it. The present law, therefore, discriminates against the departmental employees, and yet I can see if this provision is broadened to include departmental employees that would possibly create a precedent which the committee would wish to consider in relation to other Government employees.

MR. BULWINKLE. Which section is that? Would you give us the section for the record?

DR. PARRAN. Section 322 (a) (7), to be found on page 32, lines 7 to 9.

(7) Employees and noncommissioned officers of the Public Health Service when injured or taken sick in line of duty.

As I say, the present law provides that field employees and non-commissioned officers of the Public Health Service are entitled to such care.

Mr. BULWINKLE. I feel, Doctor, this way about this. If you open this for, you might say, the civilian employees of the Public Health Service, departmental employees, you would be in trouble with every other department in the United States Government.

Dr. PARRAN. We have recognized that fact and that is the reason I am bringing this matter to the committee's attention for the committee's consideration.

In support of it, I would only say that the Government has been broadening some of its health interests in the health of its employees, and this might be a pilot test of the further interest on the part of the Government as an employer in the health of its employees.

Actually, since there are many doctors working in the same office with nonmedical personnel, if a person gets sick, naturally we are going to give some advice and treatment. We are not going to let a person stay ill without trying to give some advice and assistance.

Mr. Chairman, I think there are no changes further in existing law in section 322 or in the section on page 33, section 323, which has to do with "medical, psychiatric, and related technical and scientific services" in Federal penal and correctional institutions.

Section 324 merely is a reenactment of the existing law.

The same is true of section 325.

And the same is true of section 326, which lists the Coast Guard, Coast and Geodetic Survey, and Public Health Service personnel, and other beneficiaries who are entitled to care.

This brings together scattered authority contained in many different laws.

Part D, regarding the care of lepers, I think is unchanged.

Part E, dealing with narcotics addicts, brings together existing laws; no important changes.

Part F deals with biological products, and there are no important changes in existing law. I am not sure but that some minor perfecting amendments may be offered by legal counsel in order to clarify further the relationship of the control of biological products to the food and drug laws.

Part G relates to quarantine and inspection.

The quarantine activities of the Service are one of its oldest functions. With minor exceptions, that part of this title which deals with foreign quarantine procedures is the same as existing law. A new section which deals with civil air navigation and civil aircraft is dealt with in broad terms so that the Surgeon General may provide regulations for quarantine procedures dealing with aircraft to conform with present and future laws regulating these aircraft.

This committee, I am sure, is much more familiar than I am with the problem of pending laws in reference to air navigation.

I would call attention to the fact that the revolution in travel brought about by the airplane has necessitated the revolution of our methods of control and our defense against disease. All of the implications of that statement I cannot see even at this time.

A new provision has been added with reference to the interstate quarantine functions. This provision gives some additional powers



to the Surgeon General in times of war and are designed particularly for the protection of military and naval personnel.

The provision to which I have just referred is contained in section 363.

Another new provision grants authority to the President, upon the recommendation of the National Advisory Health Council and the Surgeon General, to specify what communicable diseases shall be considered as quarantinable diseases and therefore excludable from importation into the country from abroad. It is quite likely that special quarantine measures will have to be taken to prevent the wartime introduction into this country of certain diseases not now on the quarantinable disease list.

Mr. REECE. Mr. Chairman, if I may revert to section 344. You have covered section 344?

Dr. PARRAN. I have covered all of Title III, Mr. Reece.

Mr. REECE. With reference to the treatment of voluntary patients?

Dr. PARRAN. What page is that?

Mr. REECE. Pages 43 and 44. The Surgeon General is not authorized to provide treatment under certain conditions—

unless suitable accommodations are available after all eligible addicts convicted of offenses against the United States have been admitted.

Why should a convict be given preferential consideration to an addict who has not committed an offense?

Dr. PARRAN. That is a very fair question, Mr. Reece. The only answer I know of is that once a person is convicted, the Federal Government must care for him somewhere. These hospitals were designed primarily for the care of persons who have been convicted of violating the Federal narcotics law and who themselves are addicts. It is an attempt to cure them while they were serving out their sentences.

Mr. REECE. I have been impressed that that restriction has interfered; but I think it would be unfortunate to have it interfere, and I am inclined to think that the authority ought to be vested with the Surgeon General and not enacted into law. Will you have any objection to that?

Dr. PARRAN. I would, Mr. Reece. The problem has not come up. Our bed capacity has proven adequate up to now.

Mr. REECE. That has not been my impression.

I do not want to be estopped from being admitted; I did not want to have to commit an offense to get in.

Dr. PARRAN. I would have no objection to this change.

If there are no questions, may we turn to title IV, which deals with the National Cancer Institute?

Mr. BROWN. You are now getting to the kind of work which I think you should do.

Dr. PARRAN. This act has been in operation since 1937. It has proven itself an excellent model in an attempt to prevent and control a special disease. I emphasize the word "model" in this connection, because it is conceivable in the future Congress may wish to consider favorably a comparable approach to other great health problems which are of importance to the Nation.

The structure of the National Cancer Institute law; the balance of authority between an outside group of advisers and the Surgeon Gen-



eral, the authority for grants in aid and fellowships and training of personnel, and the loan of radium—altogether forms an excellent model of law. For this law thanks are due to the interest of this committee, and especially its chairman. It seemed desirable not to submerge or in effect cancel out such a special law which has proven of such great value.

Mr. BROWN. Let me ask about these donations, Doctor. I understand you have a considerable number of donations from funds, I understand, for cancer control. What do they amount to?

Dr. PARRAN. Our largest donations have been in fields other than cancer. A little later I shall refer to the authorization to accept gifts.

In connection with cancer, very considerable amounts of private philanthropic funds have been expended, but because of the close working relationship between the Cancer Institute and other institutions doing comparable research, such philanthropists have made their grants directly or through foundations. There is a Childs fund at Yale University; there is the Donner fund in Pennsylvania, and others.

We have, in a sense, interlocking directorates between these funds and the National Cancer Institute, so that members of our council are also members of other councils, and as the result there is an integration of programs. Although as yet there has been no substantial money gift to the National Cancer Institute, there was a very generous gift of land for that institute and other Public Health Service functions.

Mr. BROWN. I note you provide for it here on page 60.

Dr. PARRAN. Yes, sir.

Mr. BULWINKLE. That is part of the original law.

Mr. REECE. Do those who are working in that field have good reason to have hope of progress?

Dr. PARRAN. They do have, Mr. Reece. I must say, of course, we have not discovered the cause or means of prevention or a specific cure of cancer; but I like to compare what we have done with the construction of a building. The foundation—some of the foundations already were laid when we started. One after another, bricks have been added to the structure. We do not know when the capstone will be put on or who will do it; but certainly we have proven certain things and have disproven other things which are essential for the further advance in knowledge.

Mr. REECE. As to any advances which are made, are those results made available to the medical profession generally; that is, so that the small-town physician, so to speak, is in a position to appropriately advise his patients?

Dr. PARRAN. We have done everything in our power in the direction you indicate and specifically we have loaned radium; we have granted training to a considerable group of young physicians who have gone back to their home towns, where they have organized cancer services in their local hospitals, and each such person who is trained has been a center for the further education of other doctors.

Mr. REECE. A moment ago you referred to the question of fellowships. As that provision is now written, do you think it is sufficiently broad to enable you to select the fellows from this or other countries?

Dr. PARRAN. The language in the present National Cancer Act is sufficiently broad. I am not sure whether we have carried over into this title the authority to employ persons from other countries.

Mr. REECE. For one I would rather like for whoever is giving attention to the drafting of the act to draw an amendment or suggest changes in the language which would enable the Public Health Service to grant these fellowships to anyone they might think might best serve the public interest by so doing.

On matters of this kind I do not think it makes any difference where the doctor comes from. If he makes a contribution we ought to provide for recognition.

Dr. THOMPSON. The provision for fellowships is carried on page 22, Mr. Reece.

Mr. REECE. I notice that. Are you satisfied that that language is sufficient to enable him to do what you had in mind doing?

Dr. THOMPSON. That is right. Also, on page 59.

Mr. REECE. That is, you are satisfied that that section eliminates the restrictions which heretofore had limited you?

Dr. PARRAN. Yes, unless there is continued in the annual appropriations act a general prohibition. I should think the only way your purpose could be accomplished, Mr. Reece, would be by an amendment to the language of annual appropriation acts.

Mr. PRIEST. You could write a provision to the effect that the provision or the limitation as to the Public Health Service is excepted in the case of a general amendment which applies to the employment of nonresidents or noncitizens, and not make an exception in this case to the appropriation bill. Do you think that would take care of it?

Dr. PARRAN. May I refer your question to Mr. Wilcox?

Mr. PRIEST. Yes.

Mr. WILCOX. I think that might be done, sir, in such a way that they are generally not precluded. I think that is a very good suggestion.

Mr. PRIEST. Because there probably will be reenacted some sort of a prohibition on an appropriation, some general provision, but an exception can be written into this code which might be wise.

Dr. PARRAN. I hope that will be done. Title V refers to certain miscellaneous provisions. The Public Health Service is authorized under many acts to accept gifts—for marine hospitals, in behalf of cancer, in behalf of research, and this language is an attempt to harmonize the provisions of the several existing pieces of legislation.

I should like to refer to the fact that the Institute of Health did receive a gift of \$100,000 for fellowships in chemistry; a gift through the benefaction of Mr. and Mrs. Luke Wilson of 92 acres of land, together with several houses and other improvements on which are now located the Public Health Service Headquarters, the National Cancer Institute, and National Institute of Health, at Bethesda, Md.

Section 502 carries forward authority now contained in the annual appropriations in reference to the hospital at Ellis Island. This broadens the language to include other hospitals of the Immigration and Naturalization Service if they are available for the purpose stated.

Section 503 provides that funds paid by the Immigration and Naturalization Service for reimbursement of individuals retained in Public Health Service hospitals, and money collected from foreign seamen and from pay patients shall be covered into the appropriation from which expenses of such care and treatment were paid. Existing law provides for covering of all such funds into the Treasury as miscellaneous receipts.

I call attention to this as a change in present law.

Section 504 in effect carries forward existing implied authority of the Public Health Service for the care and treatment of its beneficiaries who are insane. This makes it clear that they are not only beneficiaries of St. Elizabeths Hospital, but also are beneficiaries of the Public Health Service, and authorizes their care in any of our hospitals equipped for such care.

Section 505, I think is the same as existing law. There is no change.

Section 506: Transportation of remains of officers. This is the same as present law, except that it includes besides "officers," payment for transportation of remains of other personnel specified in regulations who die in line of duty.

We have civil-service personnel serving at stations distant from their homes, and it seemed desirable to make that minor extension.

Section 507 contains the same provision as existing law, except that special provision is made for payment where the amount due to the estate is less than \$1,000 instead of \$500 as specified in existing law.

Title VI refers to temporary and emergency provisions and repeals.

This title is not a part of the proposed Public Health Service Code but contains some important provisions nevertheless. Existing provisions, procedures, organization units, regulations, and so forth, applicable to the service remain in full force until specifically modified, superseded, or repealed pursuant to authority contained in this act. In other words, this gives us our breathing period between the passage of the code and the formulation of the very complicated regulations which will be necessary in which to continue operations under the present laws and regulations.

Title VI provides also that funds, property, and so forth continue available, and transfer of funds between appropriations for purpose of reorganization under section 202, and so forth, shall continue to be available and the transfer of funds between appropriations can be made as a result of the reorganization provisions in this act.

The same provision is contained in Public Law 184.

Section 604 authorizes an emergency appropriation of \$1,500,000. It revivifies a provision passed in 1919 containing almost identical language. There is some question as to whether the term "emergency" in 1919 referred to the war which had then closed—certainly the armistice had been signed—or whether it was intended as continuing legislation. The committee may wish to direct some questions to legal counsel on this score. I frankly do not feel competent to make an interpretation.

Sections 605 to 608 incorporate changes in sections 8 and 9 of Public Law 184. The language and form, however, vary somewhat from Public Law 184.

I have indicated earlier, Mr. Chairman, that as a result of the military benefits given in general terms by Public Law 184 to officers of the Public Health Service you may wish to have spelled out, in terms of the particular laws, those benefits now apply to such officers.

Section 609, Mr. Chairman, is an attempt, and I hope an accurate one, to repeal all laws and parts of laws which now are obsolete, or which have been reenacted in this code or which have been modified therein.

In my testimony, Mr. Chairman, I have attempted to point out all of the major changes in existing law and many of the minor ones which are involved in H. R. 3379.



Mr. BULWINKLE. Any questions, gentlemen?

Doctor, we thank you. Will you stand by for further reference?

Dr. PARRAN. I certainly shall, and I thank you very much, Mr. Chairman, for your sympathetic consideration of the problems I have discussed.

Mr. BULWINKLE. Mr. Wilcox, if you will excuse me this morning, there is rather a short time left. Mr. Johnson, counsel for the Lake Carriers' Association, of Cleveland, Ohio, who has only a short time to be in the city is present and we would like to hear him briefly. And he might bring up some matters which you gentlemen are concerned with.

Mr. Johnson.

#### STATEMENT OF GILBERT R. JOHNSON, COUNSEL FOR THE LAKE CARRIERS' ASSOCIATION, CLEVELAND, OHIO

Mr. JOHNSON. Mr. Chairman and gentlemen of the committee.

Mr. BULWINKLE. Mr. Johnson, will you give your full name, address, and representation for the record?

Mr. JOHNSON. My name is Gilbert R. Johnson. I am counsel for the Lake Carriers' Association; offices are in Cleveland.

The Lake Carriers' Association is composed of the steamship companies which own and operate the ships of the Great Lakes, which transport iron ore, coal, limestone, and grain; that is, the bulk commodities.

The fleet of those companies consists of 360, approximately 360 ships, and it is about 95 percent of the total American tonnage on the Great Lakes.

The Public Health Service in this bill deals with water transportation or shipping in two respects: Seamen obtain medical treatment and care at the Public Health hospitals and stations.

The Public Health Service deals with the movement of ships between States and between the United States and Foreign countries; that is to say, ships moving in interstate and foreign commerce.

My comments are directed entirely to those two phases of the bill.

In the first place, Mr. Chairman, I do not want anyone to think that we are objecting to the bill.

With regard to the definition of the term "seamen" contained in section 2, a new word is injected. I think the language of—

Mr. BROWN. What page is that, Mr. Johnson?

Mr. JOHNSON. That is page 2.

Mr. PRIEST. Page 2, line 18.

Mr. JOHNSON. I believe the language of the existing statute, which is 24 United States Code Annotated, section 1, is exactly the same as this definition, with the exception that the word "primarily" is used in the restatement. The definition would read then that "The term 'seamen' includes any person employed on board primarily in the care, preservation, or navigation of any vessel, or in the service, on board, of those engaged in such care, preservation, or navigation."

I ask the committee, Mr. Chairman, to give careful consideration to the exclusion of this new word.

The term "seamen" is used variously in the Federal statutes, and rather strangely perhaps it is seldom defined. The courts have said it



is a generic term, but always when the term is subjected to definition by the courts, the statutory definitions are resorted to and are considered to be of considerable importance.

I am thinking particularly about actions modifying the statutes with respect to the rights of seamen upon injury and the exclusion of seamen from the Fair Labor Standards Act.

I would not go so far as to say that legal or judicial decisions construing either of those statutes would be upset; but I do submit that the use of the word "primarily" now would be rather a disturbing element.

Actually it does not seem to me it makes a great deal of difference so far as the Public Health Service is concerned.

I would think that they could always determine whether or not they were dealing with seamen or with men who are really shore employees or other persons who have to do with the maritime industry.

Mr. BULWINKLE. In other words, you would take a cabin boy or a mess boy; he would not be engaged in the care, preservation, or navigation of any vessel?

Mr. JOHNSON. Well, it has been held that a cabin boy is a seaman entitled to relief upon injury under the so-called Jones Act, which is section 33 of the act of June 5, 1920.

Mr. BULWINKLE. But your amendment would be to strike out the word "primarily"?

Mr. JOHNSON. Yes; leave the definition as it is.

Mr. BULWINKLE. Mr. Wilcox, may I ask you where you and Mr. Perley got this definition from?

Mr. WILCOX. I think Mr. Johnson's statement is quite correct. It comes from section 1 of title XXIV of the United States Code.

Mr. BULWINKLE. Why did you add "primarily"?

Mr. WILCOX. I think it was to take care of some doubts we had about certain border-line cases and the question of men entitled to Public Health Service treatment.

First, I should have some doubt as to whether it would have any bearing on the interpretation of any other statute if that word is included. I do not think we feel too strongly about it one way or the other.

Mr. BULWINKLE. All right, Mr. Johnson, you may proceed.

Mr. JOHNSON. Well, those are all the comments I have about the definitions.

On page 49 of the bill there appears the provision which would enable the Public Health Authority to promulgate the regulations which would relate to the movement of ships between the States and between foreign countries.

The language of this bill I think is very much the same as existing law.

Mr. BULWINKLE. That is, the act of 1893?

Mr. JOHNSON. Yes. You will note that there is a very broad power on the part of the Surgeon General to promulgate and to enforce the regulations. It seems to us that it would be well in the promulgation of those regulations if, wherever it is consistent with the public health—and I do not think there ought to be any hard and fast rule at all—that the Surgeon General consult with the industry before the regulations are actually put into effect.

Violation of the regulations to carry with them rather serious penalties, and it seems to me that in the ordinary administration of the law it would be better, wherever it can be done, for the Surgeon General to obtain the views of the industry before the regulations are promulgated.

That particular point is brought to our attention right now through a matter which is under discussion between us and the representative of the Surgeon General in Chicago. Now, I am not referring to this particular incident with any implication of criticism whatever. We have great respect and high esteem for the Public Health Service. The Public Health Service, of course, may go so far as to promulgate regulations relating to the handling of food aboard ships; well, the regulation of the source from which the food is purchased, and the manner in which water that is consumed aboard ship is treated and handled, and furnished to the crew, and other things that relate to the suppression or minimization of disease.

At the moment, the Great Lakes carriers are discussing with the Public Health office in Chicago the matter of dispensing or handling milk aboard ship. It has been suggested that—now, I am only speaking of cargo ships. I am not speaking of passenger ships at all, but cargo ships where the only problem is bringing food aboard and furnishing it, preparing food for the crew.

It has been suggested that milk which is furnished to the crew on the table shall be distributed in, or first procured, in individual bottles, and distributed and fed to the crew in that fashion.

People who have studied the matter have serious doubts that any such rigid regulation is necessary in the suppression of disease.

In the second place, that sort of regulation would impose a great deal of extra work upon the galley crew, and right now with the manpower situation as it is, is no time to add to the work of men who are on the job.

Well, on that point our suggestion is to follow the pattern which was made in the inflammable-cargo statute, for instance, and in tanker vessel act, so far as is consistent with the public health; let the industry first see the regulations before they are promulgated.

Mr. BULWINKLE. Doctor, do you consult with the industry?

Dr. PARRAN. Mr. Chairman, I do not recall any major changes having been made in quarantine procedure except one instance. In recent years, and this was before the war, which had to do with the question of radio pratique, which was a liberalizing provision insofar as expediting ocean commerce was concerned, and that change was made, I know, after very careful study and many consultations with the industry.

May I ask Mr. Johnson if there have been instances in which regulations have been changed, or do your comments refer primarily to the difference in interpretation of the regulations, as, for example, for milk?

Mr. JOHNSON. Well, it may be in the interpretation. Of course our feeling, Dr. Parran, is that particular regulation is now directed, and should be directed, more to the handling of milk on passenger ships or trains, and that sort of thing.

Dr. PARRAN. Mr. Chairman, except in dealing with emergency situations which may need prompt enactment of regulations to deal

with epidemics, we would have no objection—in fact it would be our purpose to consult with the interested groups.

MR. BROWN. Doctor, do you have any objection to writing in a provision of law then that they should be consulted in connection with revising the regulations?

DR. PARRAN. With appropriate language, I would not have any objection.

MR. BROWN. You would have to protect against certain emergencies, perhaps; but in ordinary procedure, general changes I really have the feeling that industry should always be consulted by Government, because sometimes industry can tell some of us in Government some things we have not thought of.

DR. PARRAN. I may say, Mr. Chairman, that the Lake Carriers' Association have been of inestimable aid to the Public Health Service during many years in connection with our mutual problems.

MR. JOHNSON. Thank you.

MR. BULWINKLE. I think you two gentlemen might get together and work out whatever differences you have.

MR. JOHNSON. We have not had any trouble so far.

MR. BULWINKLE. Minor differences, I mean, so that if that is all, Mr. Johnson—

MR. JOHNSON. No; I have one more point, if you please.

Section 366 deals with the ship which is trading between the United States and foreign countries.

Paragraph (a) of that section provides that while the ships in a foreign country shall obtain from such designated officials a bill of health in duplicate and then upon her arrival in a United States port she shall file that bill of health with the collector of customs of the port of entry—that is substantially existing law; but the approach is a little different. Under present law as to the Great Lakes—and they are referred to here as the frontier waters—the provision does not apply until in the judgment of the Public Health Service or the Surgeon General it becomes necessary to involve that provision of law.

Now, we think that you should restore in this bill the provision in existing law and as to the ships which are trading between the United States and Canada and really they are shuttling back and forth there almost every day.

MR. BROWN. Having been quite a lake traveler myself, I appreciate what you are saying, because you put into a Canadian port maybe within 20 or 30 minutes after you pull out of an American port and just stop long enough to unload one package and go on.

MR. JOHNSON. That is right. And we think it would be better if we were out until in the judgment of the Surgeon General it became necessary for us to be in.

MR. BROWN. The Surgeon General has recognized that condition in the past, as I understand it.

MR. JOHNSON. Yes. I do not know of any instance or any time when this particular provision has been applied to ships that are trading between the United States and Canada.

MR. BROWN. You would be ready and willing to recognize that same situation in the future and apply the same ruling as you have applied in the past?



Mr. PARRAN. Yes, sir. An attempt is made at exactly the point Mr. Johnson has brought up, on page 55 in subsection (d), which says:

The provisions of subsections (a) and (b) of this section shall not apply to vessels plying between such foreign ports on or near the frontiers of the United States and ports of the United States as are designated by treaty or may be designated by regulation; nor, to the extent prescribed by regulations, to such of the other vessels referred to in subsection (a) hereof as may be designated in such regulations.

This is designated exactly to take care of this situation, because the treaties in effect between Canada and the United States provide for the purpose which Mr. Johnson wishes to have continued.

Mr. JOHNSON. Maybe my interpretation of this has been wrong. I thought it was the reverse of the existing law, in that you had to promulgate a regulation now to relieve us from these provisions.

Dr. PARRAN. May I make a brief statement off the record?

Mr. BULWINKLE. Yes.

(After discussion off the record:)

Mr. JOHNSON. May I say one word about the penalty provisions?

Mr. BULWINKLE. Yes, sir.

Mr. JOHNSON. These are criminal penalties and not civil penalties and that means if anybody does violate the law there has to be an indictment or an information to get him cleared. With a civil penalty, of course, it is different. You pay the money and you do not have to have an indictment or information.

Now, in our navigation and shipping laws we do have more frequently civil penalties than criminal penalties.

Mr. Chairman and gentlemen, I thank you very much for permitting me to be heard.

Mr. BULWINKLE. Thank you very much, Mr. Johnson.

Mr. PRIEST. We appreciate your coming down.

Mr. BULWINKLE. The committee will stand adjourned until 10 o'clock tomorrow morning when Mr. Wilcox will go on.

Dr. PARRAN. Mr. Chairman, would it be possible for me to insert in the record at this point a short statement bearing on the consideration which prompted the use of the term "primarily" in the definition of who is or is not a "seaman" for the purposes of this bill.

Mr. BULWINKLE. Yes. Without objection you may put it in the record.

(The statement referred to is as follows:)

The inclusion of the word "primarily" in the definition of the term "seamen" in this section does not operate to exclude any persons who would be eligible under the definition of the term "seamen" as given in the act of March 3, 1875, as interpreted by the Comptroller General in 1939.

In applying the definition of the term "seamen" difficulty has been encountered in deciding upon border-line cases, particularly in instances where the principal duties performed by an individual were other than in the care, preservation, or navigation of a vessel, or in the service, on board, of those engaged in such care, preservation, or navigation. Questions as to the eligibility for medical treatment frequently arise with reference to certain persons on vessels who have very incidental duties, if any, of seamen. The Service has been importuned to consider such individuals as being eligible for medical benefits of the Public Health Service.

On May 5, 1939, the Secretary of the Treasury presented the following questions to the Comptroller General and requested his advice:

"(a) Are employees of such agencies<sup>1</sup> to be deemed seamen and, therefore, entitled to medical relief where they are not employed on board vessels primarily

<sup>1</sup> This question related to employees of the Engineer Corps of the U. S. Army and the Mississippi River Commission employed on board vessels of those agencies for mixed duties.



in the care, preservation, or navigation of such vessels or in the service, on board, of those engaged in such care, preservation, or navigation, but primarily perform duties on board of a workshop character not connected with the care, preservation, or navigation of vessels.

"(b) Are employees of such agencies to be deemed seamen and, therefore, entitled to medical relief where they are employed on board vessels primarily in the care, preservation, or navigation of such vessels or in the service, on board, of those engaged in such care, preservation, or navigation, but also perform other duties on board of a workshop character not connected with the care, preservation, or navigation of the vessels?"

The Comptroller General under date of May 29, 1939, rules as follows:

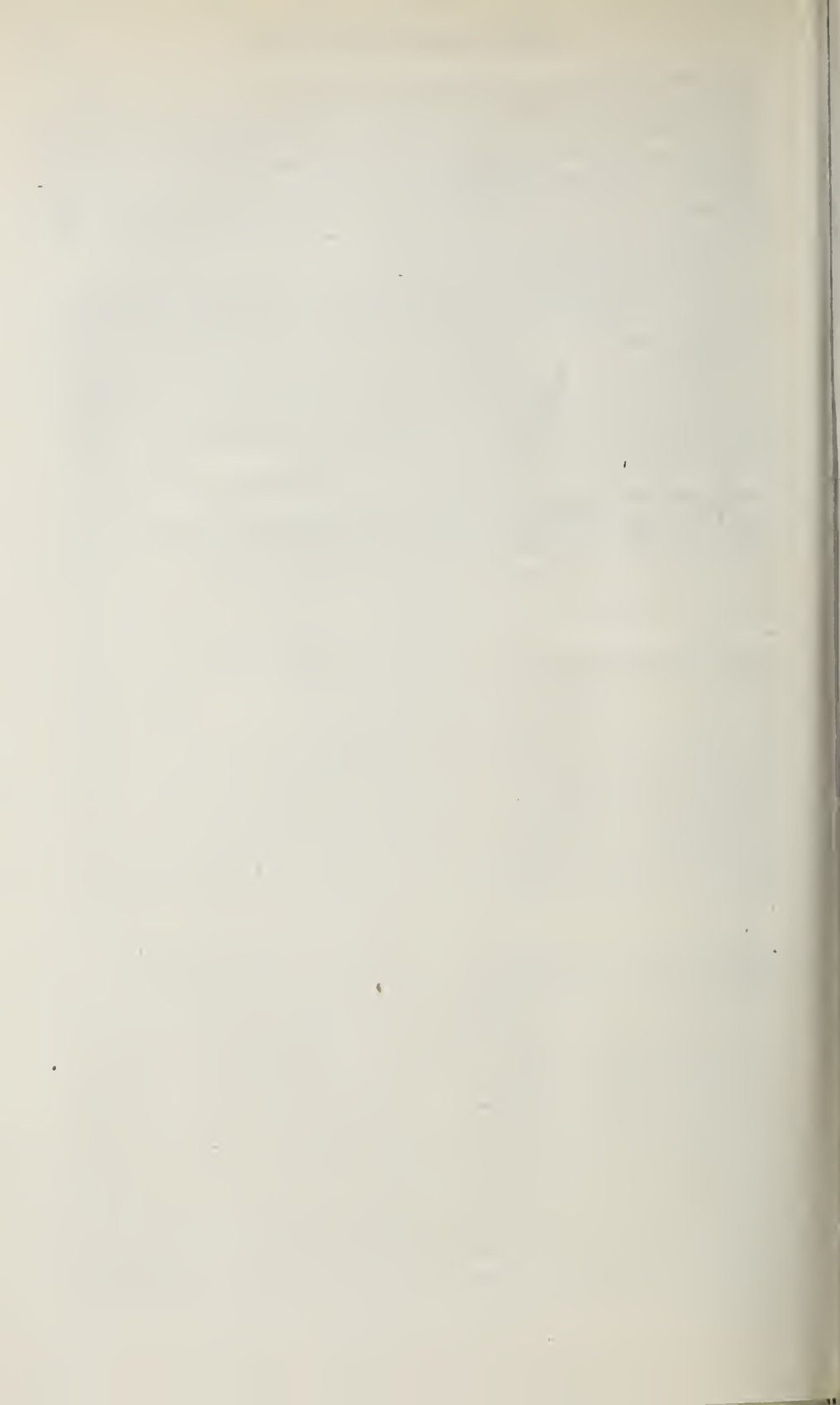
"The primary or predominant objective of the duties performed by the involved employees would appear to constitute a proper basis for classifying them as seamen within the meaning of the term 'seaman,' as defined in the cited statute. Accordingly question (a) is answered in the negative, and question (b) in the affirmative."

The interpretation of the Comptroller General above quoted has been followed.

The Public Health Service is not seeking to expand or limit its beneficiaries. It is hoped that the committee, after consideration of this matter, will clearly indicate the wishes of Congress as to the type of persons in the seamen category eligible for medical benefits of the Public Health Service.

Mr. BULWINKLE. The committee will stand adjourned until 10 o'clock tomorrow morning.

(Thereupon, at 12:05 p. m., the subcommittee adjourned to meet at 10 a. m. the following morning, Thursday, March 2, 1944.)



## PUBLIC HEALTH SERVICE CODE

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THURSDAY, MARCH 2, 1944

HOUSE OF REPRESENTATIVES,  
SUBCOMMITTEE OF THE COMMITTEE ON  
INTERSTATE AND FOREIGN COMMERCE,  
*Washington, D. C.*

The subcommittee met at 10 a. m., pursuant to adjournment, in the hearing room of the committee, New House Office Building, Hon. Alfred L. Bulwinkle presiding.

Mr. BULWINKLE. The committee will come to order. We will hear Dr. Riley.

### STATEMENT OF DR. R. H. RILEY, M. D., STATE HEALTH OFFICER FOR MARYLAND, REPRESENTING THE EXECUTIVE COMMITTEE OF THE ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICERS

Mr. BULWINKLE. Dr. Riley, you are State Health Officer for Maryland?

Dr. RILEY. I am.

Mr. BULWINKLE. And representing—

Dr. RILEY. I am a member of the executive committee of the Association of State and Territorial Health officers.

Mr. BULWINKLE. Dr. Riley, you may proceed.

Mr. PRIEST. Doctor, may I ask one question?

Dr. RILEY. Yes, sir.

Mr. PRIEST. Are the health officers of all of the States represented in the association?

Dr. RILEY. They are all members and we get together upon the call of the Surgeon General of the Public Health Service at least once a year and once in a while we are called in for special consideration of special matters that may come up.

Mr. BULWINKLE. All right; you may proceed, Doctor.

Dr. RILEY. The executive committee met last Saturday and considered House bill 3379. In the meantime we had letters from those who could not attend and from the health officers of the country concerning the bill, and for the most part the bill is acceptable to the State health authorities. In fact, there are only two suggestions made for changes, one on page 17, and when we discussed this with Dr. Thompson, of the Public Health Service, we found that he had already picked it up and had made the change, anticipating the feeling of the State health authorities.

Mr. BULWINKLE. What was that?

Dr. RILEY. That is on page 17, lines 7 and 8 (sec. 214 (b)).

The change we suggested was that instead of "or political subdivision thereof," omit that, and insert "health authority" and it would read:

(b) Upon the request of any State health authority, personnel of the Service may be detailed by the Surgeon General for the purpose of assisting such State or political subdivision in work related to the functions of the Service.

Now, the reason for that is that it would be very awkward for the State health authority to have counties asking for assistance, or appropriation—counties, or districts, or cities. That has been done. It would be very awkward for the Service to have to deal with it that way. So, there would not be any over-all supervision in the States if these subdivisions were allowed to come in and ask for assistance.

Now, that does not mean that these areas are excluded. In fact, they are all benefited; but it is the State's responsibility to make such distribution of allotments to the cities and to the counties as is needed.

And, we assume that the State knows better than the Public Health Service could possibly, of the need in any particular area.

Mr. SCOTT. Doctor, are you suggesting that it read: "Upon the request of any State" comma—or merely that it should read: "Upon the request of any State health authority", without the comma?

Dr. RILEY. "Upon the request of any State health authority" without the comma.

Mr. SCOTT. Would there not be cases in some States where perhaps requests should come from another official, for instance, from the Governor, as representing the State? Would there be any advantage in having it read "Upon the request of any State, or any health authority thereof"? It strikes me that some States may have no acceptable recognized health authority. I do not know whether that is true or not. There may be some cases where requests may only come from the Governor rather than a cabinet officer.

Dr. RILEY. I think that Surgeon General Parran should answer that, because he has had that experience. I do not know. In Maryland it would not be necessary. We would not ask the Governor. We might ask him to support us upon any question, but that would not be necessary with the present administration of the Public Health Service, if we showed a real need for help.

Mr. SCOTT. Perhaps Dr. Parran can answer it.

Dr. PARRAN. I think every State—I know every State has a recognized health authority.

That term is used in connection with many of our regulations concerning the grants-in-aid.

Mr. SCOTT. Thank you.

Dr. RILEY. Now, the only other change is on page 29, which is recommended by our committee, and it is in line 7, page 29. I will read the whole thing:

(h) All regulations and amendments thereto with respect to grants to States under this section shall be made—

And here is where we make our change—

after consultation and agreement with a conference of the State health authorities.

We felt that while there has been no difficulty with the present administration and as long as Dr. Parran is in his present position



we would have no concern, we would not even ask this, but he cannot be there always, and it could be embarrassing for the States if a conference is held on allotments and then the Surgeon General wanted to be arbitrary and did as he wanted to do or could be arbitrary about it; we felt that if we added the words "and agreement" after the words "after consultation," with a conference of the State health authorities that that would be safeguarded.

And General Parran has agreed to that, and I understand the other as well.

I think probably he would have suggested it himself if he had run on to it before we saw it.

Now, those are the only changes. I think it is a remarkable bill. I think it is very timely.

I would like to say that our relations with the Public Health Service, the States, has been very satisfactory and we do not want anything to come in, any new regulation that would in any way change it.

Mr. BULWINKLE. You knew my old friend, Dr. McCormack, from Kentucky, who died?

Dr. RILEY. Yes; he would have said the same thing, and every health officer of the States will tell you the same, and would tell you the same whether Dr. Parran was present or not. I mean, our relations have been very satisfactory and public health in this country has gone ahead in a remarkable way, because of these allotments referred to by Mr. Reece.

Now, I realize that everything that is needed cannot be done even on the amount of money we now receive which at one time would have seemed like an immense amount. It is now swallowed up and we are doing very much more, but we are not able to do everything that is needed in every community.

Mr. REECE. We have done a great deal, Doctor, but I am not in accord with the view that we have moved rapidly on a matter of such vital importance. I think we have moved very, very slowly, especially considering the resources, professional and financial, that we have had available for this purpose, I think one can hardly go about the country without being impressed with the tremendous work that yet remains to be done.

Dr. RILEY. No doubt about that.

Mr. REECE. If I may ask—these questions are directed more particularly at Dr. Parran—what was the over-all expenditure of the Public Health Service in 1943?

Dr. PARRAN. Mr. Reece, does your question refer to the amount that we spent for operation of hospitals, quarantine, or only for the grants to States direct for public-health work?

Mr. REECE. Well, first, the over-all expenditure for all purposes.

Dr. PARRAN. I do not have the figure here, but I think under the several titles which I will read, I can give you the individual items.

Division of Venereal Diseases, \$12,300,000;

Grants for public-health work, \$11,000,000.

Mr. REECE. Pardon an interruption there. Of course, I infer from the statement you made yesterday the \$12,000,000 for venereal-disease control does not represent the full amount expended for that purpose.

Dr. PARRAN. To that amount should be added approximately the same amount during the current year for the acquisition and operation

of rapid-treatment centers for infectious cases under the provisions of the Lanham Act.

The appropriations made to the Public Health Service for the fiscal year 1944 are as follows:

|                                                                    |              |
|--------------------------------------------------------------------|--------------|
| Division of Venereal Diseases.....                                 | \$12,367,000 |
| Grants to States for public health work.....                       | 11,000,000   |
| Training for nurses (national defense).....                        | 52,500,000   |
| Interstate quarantine service.....                                 | 28,000       |
| Prevention of epidemics.....                                       | 300,480      |
| Emergency health and sanitation activities (national defense)..... | 11,279,000   |
| Pay of personnel and maintenance of hospitals.....                 | 12,510,700   |
| Division of mental hygiene.....                                    | 1,134,680    |
| Foreign Quarantine Service.....                                    | 1,250,000    |
| National Institute of Health.....                                  | 2,025,020    |
| States' Relations Division.....                                    | 306,800      |
| National Cancer Institute.....                                     | 530,000      |
| Commissioned officers, pay, etc.....                               | 2,822,000    |
| Salaries, Office of Surgeon General.....                           | 450,000      |
| Miscellaneous and contingent expenses.....                         | 195,000      |
| Total.....                                                         | 108,698,680  |

Mr. REECE. How much was spent by way of grants to States in co-operating with State health services?

Dr. PARRAN. \$23,300,000.

That includes venereal disease control.

Mr. REECE. Then, independent of venereal disease control.

Dr. PARRAN. \$11,000,000 for general public health purposes.

Mr. REECE. Out of an appropriation of how much?

Dr. PARRAN. Generally speaking, the largest single item is for training of nurses, about \$52,000,000. All other appropriations, public health appropriations, approximate \$63,000,000.

Mr. REECE. Do you not rather feel, addressing again my statement or question to Dr. Riley, that of all of these appropriations \$11,000,000 for cooperation with the States is rather inadequate in proportion to the whole expenditures?

Dr. RILEY. I think it is. In fact I know it is.

The States are not always able to get the amount of money that they should have for carrying on the program. It cannot be done. Maryland is, I think, as liberal as any State in the Union, but still there is a limit to the amount we can get, and we cannot begin to do the work in Maryland we are carrying on now without this allotment from the Public Health Service, and if that is ever withdrawn I do not know just what will happen to the program.

Mr. REECE. Well, the other States are probably experiencing the same difficulties even in a greater degree than you are experiencing in Maryland.

Dr. RILEY. Yes; I believe Maryland is better off.

Mr. REECE. That gets back to the point that I had in mind. Now, so far as the people in the more remote areas are concerned or in the other areas, for that matter, this money spent in cooperation with the State public health service is the only phase, or about the only phase, of the public health work with which they come in contact or by which they are benefited directly. Of course, they are the beneficiaries of the research in public health and which I am heartily in favor of being continued on whatever scale can best accomplish the highest result.

But what has impressed me is that we are spending relatively large sums; that we are spending large sums of money, and a relatively small part of it is finding its way out in cooperation with the local health authorities for public health work in the communities, after all, where the people live, and which need the work, and I sometimes am impressed that in painting an over-all picture we have a tendency to overlook the family away back out in the country for whom the whole activity is carried on; and I would like to see a study made with a view of seeing if something more cannot be done.

Now, the conditions, the health conditions, in certain areas are not at all satisfactory, and we have too much of a tendency, I think, to chase off after the phantom in some remote part of the world and undertake a responsibility, whereas we have work here that ought to be done, and if that responsibility which we have recognized as being a responsibility of the Federal Government is discharged adequately then I think there is going to be a much less demand arise for what is generally referred to by the medical profession as socialization of medicine. The demand for that, I think, arises unconsciously out of this need to which we are referring.

Mr. BULWINKLE. May I say to you, if you are through, Mr. Reece, that the Public Health Service has gone a long way. I can remember since I have been in Congress that it was pretty hard to get appropriations. It was due largely to the constant advertising, the constant bringing to the attention of the public the case of venereal diseases by Dr. Parran and by the State health officers that we were enabled to get that through, and even at the time that we did get the appropriation, the authorization for the appropriation, there was quite a tendency in the House to cut down the amount of that appropriation. All of this is a matter of public education that you have to bring to the public. There are two things. One, of course, is—and you find this, in a great many instances, in connection with the talk of this socialized medicine—I venture to say that now in the Public Health and in the State health authorities you will hear this thing, “You ought to stop that, because that is getting to socialized medicine.”

I introduced, and we passed, the cancer bill, and yet I had doctors in my own State criticize me very severely for it, saying, “You are bringing on socialized medicine.” I said, “No. All I am doing is to give, so far as we can do it in the United States Government, the idea of prevention, and that is the work of the health department.”

Now, as to this, what do you say about work overseas, there is very little of that that has been done, but most of it has been done for the purpose of studying diseases which might be brought back to this country by our own troops, and to preserve the health of the civilian employees as well as the members of the armed forces who are abroad.

As stated, there are only 12 members, or about 12, now of the Public Health officials who are attached to civilian duties across.

I know we had a man come down to our country, a mosquito-control man. He could stop you on the street and talk for 2 hours about mosquitoes, and it would be the most interesting and entertaining speech you ever heard, about the different kinds of mosquitoes and different kinds of diseases carried by them. But he, I think, is across now studying this question, of what diseases there are abroad that might be brought back here.



But, what we want to do is to create in the minds of the Members of Congress, within the limits of our appropriations—and I might say this, that what is being appropriated now, of course, is due to the emergency—the \$52,500,000 for the nurses' training; the additional amount that you get from the Lanham act on venereal diseases and some others—that the total appropriations that we have contributed to the public health from the Congress has not been so much, after all. If we give them the funds, they can do the work. But, we have got a little education to do in the meantime.

Mr. REECE. I do not think the Congress requires so much education.

Mr. BULWINKLE. I am talking about the country.

Mr. REECE. I have not observed any great reluctance on the part of Congress to appropriate funds for these purposes. I think Dr. Parran will bear that out.

Mr. BULWINKLE. I remember this, in connection with the first venereal disease control bill the House Appropriations Committee cut down the appropriation below the authorization. We had to put it in the Senate.

Mr. REECE. I am heartily in favor of the venereal work, and I have expressed myself on that many, many times.

Mr. BULWINKLE. I am in favor of not only doing that work, but doing the work in connection with tuberculosis just like we are doing with cancer. I think we have got to come to it, especially after this war is over. There is going to have to be something like that.

Mr. PRIEST. Mr. Chairman, may I ask Dr. Riley one question?

Mr. BULWINKLE. Mr. Priest.

Mr. PRIEST. Doctor, on page 28 of this bill, paragraph (f)—Dr. Parran discussed that yesterday—with reference to the formula by which these grants-in-aid are made to the States. In speaking for the State health authorities, this has proved satisfactory, has it not?

Dr. RILEY. On that Dr. Parran asked for advice from State health officers and they agreed upon a certain formula for the distribution of these funds. So if it is not satisfactory to the States it is their own fault. They had a chance.

Mr. SCOTT. Referring to what you were saying a moment ago, I would like to get this view of mine on the record, and that is, I believe the best answer to much agitation on socialized medicine is an adequately implemented public health service. You agree with me, Doctor?

Dr. RILEY. I really do. So far as my experience in Maryland is concerned, I have said that if we set up laboratories where doctors can get service in the counties readily and provide some X-ray facilities which are being done—and we are doing the laboratory work—we have got a very extensive laboratory program and probably provided a great many biological products that doctors need and sometimes have to buy if patients get them—that has been the case in connection with antitoxin—that a great deal of this agitation will disappear.

I think if there is a good job done in each county of the State by the public-health authorities that there will not be so much clamor, I am certain in Maryland, for socialized medicine. And, we are doing everything we can in Maryland to prevent that. I do not want to see socialized medicine until we have been given an opportunity to do all we can through the health department.



Mr. SCOTT. Take for instance the chairman's reference to tuberculosis and the extension of public education in the matter of that terrible disease. My own mother died of tuberculosis when I was 5 years old. I have the feeling that had there been more education and more information in the hands of physicians in those days, she might have been saved; but I would not have any conviction at all that her chances of survival would have been any greater had she had a Government-employed doctor attending her. That is the distinction I want to make.

Dr. RILEY. Well, Dr. Parran insists that this money allotted to the States shall be used to increase the present activities and go into other fields in each county in the State. Before Federal money became available many of the counties of many of the States had no health department of any kind except a part-time health officer who was practicing medicine and giving very little thought to the preventive end; but since that time, most of the States have full-time health departments and all of the counties are carrying on this health gospel to the doorsteps of the people. They are really getting something.

Mr. REECE. Doctor, I feel a little guilty about having precipitated this discussion; but the statement that brought it to my mind was the optimistic statement that you made about the progress that public health had made in this country, and I agree with you, and Major Bulwinkle, and Dr. Parran, and everyone else, that it has made great progress; but it has made minor progress in comparison to the need for the service, and our public-health units—and I think you will agree with me—in large areas of this country, in many counties of the country, are wholly inadequate to meet the needs of the communities.

Dr. RILEY. Yes.

Mr. REECE. And I think that is a reflection upon all of us who are in positions of responsibility, when we are making large expenditures for purposes that do not reach this problem that you had in mind. I think we should consider very carefully the needs, the relative needs, for this expansion and development of health service among the people in the various States. I think it is appalling that a country such as this one which has made the progress that it has made in many lines and has the resources and has expended the resources which we have expended, that we should have such a deplorable public-health condition in such wide areas in this country which is affecting the virility of the manhood of America, which is exemplified in the physical examinations of the men going into the armed services; and that speaks louder with reference to the need for public health than any other one thing.

I do not know exactly the best way to go about it, but I think that is a problem that ought to be given consideration. In going through certain areas—and they are not isolated areas, but wide areas of this country—one cannot help but be appalled at the need for public health.

So again I want to express myself that we have not solved the problem. We have not yet met the problem.

Dr. RILEY. I think we are in entire agreement. We have gone a long ways, but there is much to do.

Mr. REECE. This is not a reflection on the Public Health Service. The Public Health Service has done a wonderful job. I am 100 per-

cent for the Public Health, and what I have to say is not in any way in criticism of the Public Health or any official of the Public Health.

Dr. RILEY. Much remains to be done. I can agree with that.

Mr. BULWINKLE. I think, Doctor, you will agree that we have a pretty efficient committee here.

Dr. RILEY. I think you have. I wish all of the States could have men in the legislative bodies of the type we have on this committee, and I think then what you are saying would not be necessary. I think we could go ahead, because I do know—I have been in three States—and I do know that the politicians in many of the States have always made it hard for the health authorities. I mean in the legislative bodies they have slighted the health work and have failed to respond. When we requested them for appropriations they have not responded to a remarkable degree. I do not know hat Dr. Parran's experience is, but it seems to me the last thing to get consideration—not so health in Maryland but in many States.

Mr. REECE. Do you not think, Doctor, that the one thing that is needed, which is manifest to the legislative bodies, National, State, and particularly the county legislative bodies, is the leadership on the part of the public-health officials. I mean, when I say leadership, I should not say on the part of public-health officials, but on the part of some one to advance the program and outline the importance of the program as well, and the needs for it. My observations have been back among the counties that when someone who was well advised on the subject came into the counties, and went before the legislative bodies of the counties and discussed this problem and outlined a program they usually met with reasonably sympathetic response.

Dr. RILEY. I think that is true. I believe we have given a demonstration over the whole United States that public health is something that is worth while, and I believe now we will have less trouble with getting local appropriations and support than we have ever had in the past, and I think if we could appear here 10 years from now you would say that you have noticed a great deal of progress. I think we are going to continue and we are training leaders to go into every area of the country, and I believe we will get a kind of response that we are entitled to; but much does remain to be done, I can assure you, even in Maryland, with all of our advantages. We are near the Public Health Service, we have fine hospitals, and we have fine traditions, medical traditions, and yet much remains to be done even in that State, and I know what it is further west and southwest.

Mr. BULWINKLE. Doctor, we thank you very much for coming over. (See letters on page 157 from I. C. Riggin.)

**STATEMENT OF ALANSON W. WILLCOX, ASSISTANT GENERAL COUNSEL, FEDERAL SECURITY AGENCY, ACCOMPANIED BY MISS MARY E. SWITZER, ASSISTANT TO THE ADMINISTRATOR, FEDERAL SECURITY AGENCY**

Mr. BULWINKLE. We will hear Mr. Willcox, assistant general counsel, Federal Security Agency. He and Mr. Calhoun, of the Federal Security Agency, and Mr. Perley, of the House drafting service, are the ones who worked on this bill, so far as the lawyers are concerned.

Mr. Willcox, you may proceed.

Mr. WILLCOX. Mr. Chairman, we have sent to the committee this morning the report of the Federal Security Agency on this bill. I have here a copy of it if you care to have me hand it up to you.

Mr. BULWINKLE. I have not had a copy.

Mr. WILLCOX. We were not able to get it until late yesterday, because of rather protracted discussions with the Budget Bureau about the report, and what we have done here is to prepare a report and to attach to it a copy of the letter from the Budget Bureau commenting on certain provisions.

Now, I propose to mention those comments as we go through this thing section by section.

Mr. BULWINKLE. I wish you would get copies of it for each member of the committee.

Mr. WILLCOX. Do you wish the letter to be put in the record at this point?

Mr. BULWINKLE. Yes.

(The letter referred to is as follows:)

FEDERAL SECURITY AGENCY,

March 1, 1944.

HON. CLARENCE F. LEA,

*Chairman, Committee on Interstate and Foreign Commerce,  
House of Representatives, Washington 25, D. C.*

DEAR MR. CHAIRMAN: This is in reply to your request of October 6, 1943, for a report on H. R. 3379, a bill to codify the laws relating to the Public Health Service, and for other purposes.

On August 24, 1942, after advice from the Bureau of the Budget that there would be no objection to the submission of my proposal to the Congress, I sent to the Speaker of the House and the President of the Senate a draft bill accompanied by explanatory letters which pointed out the necessity for internal reorganization of the Public Health Service and for certain personnel legislation. I also pointed out that the difficulties ensuing from the cumbersome organizational structure of the Service, and from certain restrictive statutory provisions relating to temporary promotions of commissioned officers of the regular corps and the distribution of grades in the Reserve Corps, had been intensified by the additional wartime responsibilities of the Service.

H. R. 7716, introduced in the Seventy-seventh Congress, and H. R. 649 and S. 400, as introduced in the Seventy-eighth Congress, were identical with the draft bill submitted to the Congress. On January 27, 1943, I reported favorably to your committee on H. R. 649 and to the Senate Committee on Education and Labor on S. 400.

These bills, based on the draft submitted to the Congress, included only the most urgently needed administrative and personnel provisions. They did not attempt to clarify the maze of statutory provisions (relating to functions of the Service as well as to personnel and organizational matters) which had accumulated through 144 years of piecemeal legislation.

At the suggestion of the Honorable Alfred L. Bulwinkle, of your committee, the preparation of a Public Health Service Code was undertaken and an effort was made to bring together in H. R. 3379, introduced by Mr. Bulwinkle on October 4, 1943, all the laws relating to the Public Health Service as well as the changes proposed by the legislation previously introduced. It was hoped that its enactment would provide the Public Health Service with a clear, comprehensive charter of its duties and responsibilities, as well as with an improved organizational structure and workable and equitable personnel provisions.

The enactment by the Seventy-eighth Congress of Public Laws 11 and 184 has taken care of three of the most urgent legislative requirements of the Public Health Service. Public Law 11 authorized temporary promotions of regular commissioned personnel during the present war and for 6 months thereafter and removed the restriction on the distribution of grades in the Reserve Corps. Public Law 184 (S. 400, with amplifying amendments) authorizes an administrative reorganization of the Service, and provides death and disability benefits for Service personnel or their surviving dependents.

However, several important objectives of H. R. 3379 still remain unaccomplished. H. R. 3379 is intended (1) to codify all existing law relating to the Public Health Service except obsolete and inconsistent provisions, (2) to harmonize and systematize related provisions of existing law which have been



enacted at different times with reference to different but related functions of the Service and which create troublesome or unjustifiable variations either in substance or in administrative procedures, (3) to repeal obsolete laws, (4) to resolve certain ambiguities in existing law, and (5) to make a number of revisions which operating experience has shown to be necessary or desirable.

While the bill is therefore something more than a mere codification of existing law it is not intended to expand the functions of the Service. The purpose of this bill is to make possible the more efficient discharge of its present functions. Most of the major changes proposed by H. R. 3379 have already been approved by the Congress in the enactment of Public Law 184. Some revision of H. R. 3379 will now be necessary in order to incorporate that enactment in the proposed Public Health Service Code.

In addition to the new matter which became existing law with the enactment of Public Law 184, H. R. 3379 proposes several substantial changes which should be mentioned.

Section 208 (a) (1) would broaden the classes of persons eligible for appointment in the commissioned corps to include those qualified in surgery, hygiene, or other specialties related to public health. Present law limits the fields of appointment to medicine, dentistry, sanitary engineering, and pharmacy. The purpose of this extension is to make possible the selection of persons with technical qualifications comparable to those of persons now eligible, but with training and qualification in related subjects rather than in any of the four specific fields mentioned in the present law.

Section 212 would give reserve officers on active duty, in time of peace as well as in time of war, retirement rights for disability or age comparable to those of regular officers. We recommend that these provisions for reserve officers be restricted to accord with present law.

Section 215 is designed to systematize the provisions of law concerning those regulations which require, and those which do not require, Presidential approval.

The authority of the President to make the Public Health Service a part of the military forces would be broadened by section 216 to include times of emergency as well as times of actual war.

Title III, part A, brings together the general grants of authority for research work found in several laws. This authorization has been made more specific and has been broadened in some respects. Section 301 (c) expands the existing authority to establish and maintain fellowships for purposes of research in connection with cancer to include research in all public-health fields. The practice of granting fellowships for purposes of cancer research has been most successful. It has permitted the selection of highly qualified personnel who may be tried out as scientific workers for a year without continued obligation on the part of the Government. It has also made it possible to assist such qualified persons to carry on their specialties by providing them with research facilities. Similarly the authority to make grants-in-aid for research projects would be extended to any field of research by section 301 (d).

In section 301 we recommend that the words "diseases, defects, and injuries of man" be changed to "diseases and impairments of man," and that the remainder of the sentence ("including environmental sanitation, industrial hygiene, water purification, sewage treatment, and pollution of lakes and streams") be deleted.

Section 314 would harmonize the legal provisions relating to grants to States for general public-health work and for venereal-disease-control work. Under existing law different procedures are established by separate statutes. Section 314 has been drawn to apply to both types of grants and to preserve what experience has shown to be the most desirable legal provisions. Also, somewhat greater flexibility has been provided. This appeared desirable because the present rather rigid provisions have sometimes resulted in surplus funds being available during a given year in some States while there was an acute need for additional funds in others and no means of making any adjustment to meet changing conditions within the fiscal year.

In addition to these changes, section 314 of the bill would remove the maximum of \$11,000,000 from the authorization of appropriations for grants to the States for general public-health purposes. This provision of law would thus be brought into accord with the provisions applicable to grants for the venereal-disease program.

Sections 361 (d) and 363 would clarify the authority of the Surgeon General with respect to the apprehension, examination, and detention of individuals who are already in the United States for the purpose of preventing the spread of communicable diseases. Section 363 is effective only in time of war. The



authority contained in these sections may already exist. Such an interpretation of existing law is open to question, however, and the Administrator has been informally advised by the Attorney General that the issuance of regulations necessary to control the spread of venereal disease by application, under Federal quarantine procedure, of the new rapid-treatment technique should await clarifying legislation. The specific authority contained in these two sections would make possible the implementation of this important wartime program of the Public Health Service.

Another change proposed by H. R. 3379 is contained in section 503 which establishes a uniform pattern for collections made by the Public Health Service for the care and treatment of certain categories of patients. At present some reimbursements for services furnished to pay patients are covered into the Treasury as miscellaneous receipts; others are credited to the appropriation from which the cost for such care and treatment was paid. The procedure followed in section 503 is that established under the Economy Act of 1932 by which the cost of hospitalization furnished for other Government agencies is reimbursed to the appropriations for the Public Health Service.

Section 604 would continue for the duration of the present war and for 6 months thereafter an authorization enacted in 1919 (40 Stat. 1303, sec. 6) for appropriations for the construction or extension of facilities. By adding the restriction in the last sentence of section 204, the bill would limit the duration of what appears to be presently existing authority.

A number of other but less important changes have, of course, resulted from the necessary revision of such a large volume of separately enacted statutes. I believe, however, that all changes of major importance have been embodied in Public Law 184 or are pointed out above.

As I have already indicated, the enactment of Public Law 184 has made necessary some further revision of the proposed Public Health Code. Continued work on this project since the introduction of H. R. 3379 has brought to light a number of other changes of somewhat detailed and technical nature which would be desirable. I will not burden this report with the specific changes which I should like to suggest but I would appreciate an opportunity to present them, together with such changes as are necessary to incorporate the provisions of Public Law 184 as finally enacted, before your committee takes action on this proposed legislation.

A complete codification of the laws under which the Public Health Service operates is badly needed and would be of great value both to the Service and to the other agencies and individuals affected by its operations. I hope that your committee will consider favorably the enactments of H. R. 3379.

While approving the general purposes of the bill, the Bureau of the Budget has advised us that certain provisions of H. R. 3379 should not be considered as being in accordance with the program of the President. The advice of the Bureau of the Budget concerning this bill is contained in a letter enclosed herewith.

Sincerely yours,

PAUL V. McNUTT, *Administrator.*

FEBRUARY 29, 1944.

HON. PAUL V. McNUTT,  
*Administrator, Federal Security Agency,  
Washington, D. C.*

MY DEAR MR. McNUTT: I have Mr. Watson B. Miller's letter of February 25, 1944, in reply to our request of January 22 for further details of the substantive changes referred to in your proposed report to the chairman of the House Committee on Interstate and Foreign Commerce relative to H. R. 3379, a bill to codify the laws relating to the Public Health Service, and for other purposes.

The general objectives of the bill to bring together all the laws relating to the Public Health Service in order to provide the Service with a clear, comprehensive charter of its duties and responsibilities and to incorporate therein structural and other changes brought about by recently enacted legislation may be regarded as in accord with the program of the President. However, of the many provisions in the bill and in the amendments which you suggest, which involve substantive changes in present basic law affecting the Public Health Service, it is not believed that the following should be considered as being in accord with the program of the President:

1. A number of changes appearing in the bill and in the suggested amendments outlined in your letter of February 25 have to do with the commissioned corps, both regular and reserve, as to grades, ranks, appointment, pay, retirement, and

"limited" and "full" military benefits. These provisions should be regarded as in accord with the program of the President only insofar as they reflect the benefits or privileges to the commissioned corps as provided in existing law or state in specific terms the benefits and privileges referred to but not fully enumerated in Public Law 184, and only insofar as they do not serve to expand the present authorized strength of the regular commissioned corps by the establishment of a reserve corps on a basis so similar that it becomes in effect a permanent and unlimited supplement to the regular corps. Illustrative of the provisions in the bill or in your suggested amendments which establish the reserve corps as a permanent and unlimited supplement to the regular corps are the following:

(a) Elimination of the provision in present law for a reserve corps "for duty in the Public Health Service in time of national emergency."

(b) Addition of benefits parallel to the regular commissioned corps such as retirement benefits for disability in peacetime, 6 months' pay in event of death in peacetime, and retirement due to age with benefits accruing after a minimum of 5 years' service.

Illustrative of other provisions in the bill or in the amendments proposed by you which would appear to extend existing law are:

(a) Provision during peacetime for 6 months' pay at death in addition to benefits payable under other laws.

(b) Entitlement to mustering-out pay.

(c) Extension in peacetime of the choice between mileage or per diem allowance for travel. Reference to \$8 per diem optional allowance in wartime should be corrected to \$7.

2. In the restatement of general authority for research and investigation contained in section 301 of the bill, reference is made to research concerning prevention of defects and injuries of man which you suggest to modify by substitution of the words "and impairments" for the words "defects and injuries." In view of the expressed interest of the Department of Labor in the field of accident prevention, I am offering no objection to the filing by the Department of Labor of a report commenting on the implication of this wording in the bill.

3. The provision in section 314 for certain State matching of Federal grants-in-aid, the amount of such matching to be determined by regulations, is accompanied by removal of limitation in the authorization for grants now provided for in title VI of the Social Security Act. Although grants for venereal-disease control are not now subject to limitation in basic law, authorization for grants-in-aid usually are in specific amounts or in terms of a matching formula specified in the legislation. Removal of all limitations on the grants-in-aid now authorized by title VI of the Social Security Act, I believe, should not be regarded as in accord with the program of the President.

4. In section 314, also, there is continued peacetime authorization for the wartime functions now carried on under the appropriations for emergency health and sanitation activities. The continuation of these functions should be upon a wartime basis. Also, in view of the recommended limitation on the authorization for grants now made under title VI of the Social Security Act, authorization for these wartime functions should be carried in a separate section.

5. In section 314 the arrangement whereby all appropriations for grants-in-aid are left to the Surgeon General for determination of the portion to be expended by the Public Health Service for administration, demonstrations, training, research, supplying personnel to State and local health offices, and so forth, I believe, should not be regarded as in accord with the program of the President. While this procedure now applies with respect to the Venereal Disease Control Act, it has not previously been applied to grants under title VI of the Social Security Act. Provision for administrative expenses in title VI grants and for expenses of interstate quarantine activities of the Public Health Service should be made under authorization for annual appropriations and not included in the authorization for grants. However, this office has no objection to the insertion of a limitation under title VI grants of an amount to be available for allocation of personnel to States in lieu of cash grants.

6. The provision in section 322 whereby all employees and noncommissioned officers of the Public Health Service are entitled to medical, surgical, and dental treatment and hospitalization without charge, I believe, should not be regarded as in accord with the program of the President. These benefits should not be extended beyond the provisions of present law.

7. Section 604 provides for renewing an enactment during World War I authorizing \$1,500,000 for emergency construction or purchase of additional facilities for the Public Health Service. The need for renewal of this authorization is not apparent and, I believe, should not be regarded as in accord with the program of the President at this time.

Very truly yours,

PAUL H. APPLEBY,  
*Assistant Director.*

Mr. WILLCOX. The general purpose and nature of the bill, I think, have been thoroughly explained to the committee by Dr. Parran yesterday, and I was proposing to start in and go through the bill section by section, undertaking to point out to the best of my ability all changes from existing law.

In some instances that is going to be a little difficult because of the rearrangement, but I think we can cover relatively all of the points that are necessary or that do involve any change in existing law.

The first section merely gives the short title. The second section consists of definitions, one or two of which were referred to yesterday.

Mr. BULWINKLE. May I ask you if you do not think it would be better to just state that as the Public Health Service laws instead of the code?

Mr. WILLCOX. I am sure we would have no objection to that, Mr. Chairman.

Mr. BULWINKLE. Go right ahead.

Mr. BROWN. May I ask, Mr. Chairman, before he proceeds, whether or not any of these recommendations here contained in this letter were followed?

Mr. WILLCOX. There has been no change in the text of the bill.

Mr. BROWN. No consideration has been given as yet?

Mr. WILLCOX. That is right.

Mr. BULWINKLE. We will have to consider that.

Mr. BROWN. That is what I wanted to know.

Mr. BULWINKLE. That is the reason I wanted the copies for each member.

Mr. WILLCOX. That was prepared subsequent to Public Law 184. So there has been no change in the text of the bill as a result of the suggestion.

The first three definitions, I think, require no comment.

The fourth:

The term "regulations," except when otherwise specified, means rules and regulations made by the Surgeon General with the approval of the Administrator—that I will come back to when we come to a later section in considering regulations, and I think it is better to defer comment until that time.

The definition of "executive department" I think requires no explanation. It is merely a convenience as a point of reference later in the bill.

The definition of "State," Dr. Parran pointed out yesterday, would have the effect of bringing the Virgin Islands into what is now title VI in the Social Security Act. I do not think I can add anything to what was said yesterday.

Mr. BROWN. How widespread are the activities of your organization in the Virgin Islands?

Mr. WILLCOX. There is money granted at present, a rather small amount, for venereal disease-control work. There is, I believe, a



public health-relief station in the Virgin Islands. So far as I know, that is all. Yes; and quarantine activity.

Mr. BROWN. But, no attempt to furnish any general health service there?

Mr. WILLCOX. That is right.

Dr. PARRAN. That is correct, and the effect of this definition would be to make the Virgin Islands eligible for a grant under title VI of the Social Security Act.

Mr. BROWN. How much do you have in mind?

Dr. PARRAN. The present grant for venereal diseases is less than \$10,000 a year.

Mr. BROWN. I mean, how much do you have in mind in case it becomes eligible?

Dr. PARRAN. For general public-health purposes, the amount would be approximately the same as for venereal diseases.

Mr. BROWN. About \$10,000.

Dr. PARRAN. I assume so.

Mr. BROWN. I ask that because the Virgin Islands has been a rather expensive proposition to the United States, I think, all of the way through.

Mr. WILLCOX. The next definition is of the term "possession." I should like to defer discussion of that if it is satisfactory to the committee until we come to the quarantine provision, which is the only place it is applicable. That again, is a matter of convenience as a point of reference in the bill rather than any substantive or operative provision.

The definition of "seamen," which was discussed a little yesterday is drawn from section 1 of title 24 of the United States Code, the change being the addition of the word "primarily" that was referred to yesterday.

That addition is really merely a clarification, because under existing law that has been held by the Comptroller General to be the test.

Mr. BULWINKLE. Since that time, I have found out from Dr. Parran, about the Public Health's experience on the west coast in regard to fishermen. A lot of men on these fishing boats are really cannerymen, in the canning business on the boats and they wanted to come under the provisions of this and the Comptroller General back in 1939, I think, ruled that it must be those who were primarily so employed.

Mr. WILLCOX. That is right. If the committee wishes to make a change to bring that group in, I think some more revision of this definition would be necessary.

Mr. BROWN. This is a limitation rather than a clarification.

Mr. WILLCOX. I would say it is more in the nature of a clarification, sir, because the present law omitting the word "primarily" has been construed as making the test the primary activity of the individual. This, I think, really would incorporate in explicit terms the test that has been applied under the present law.

Mr. BULWINKLE. In other words, on these fishing boats there are some men who are used primarily as cannerymen; but secondarily as members of the crew.

Mr. BROWN. They might help while the boat is under way and fish the rest of the time.

Mr. BULWINKLE. That is a matter of discretion for the committee. You may go ahead, Mr. Willcox.



Mr. WILLCOX. The next definition is that of "vessel" which is taken from the Revised Statutes, section 3, the only change being the addition of the clause, "exclusive of aircraft and amphibious contrivances." That is in a sense to modernize the definition, and as a matter of convenience again at a later part of the bill, it seems advantageous to have different terms applicable to watercraft and aircraft.

The next paragraph (j), is taken verbatim from existing law, except that the word "several" has been substituted for the word "innumerable" in the present law.

There is no change of any consequence at all.

Mr. BULWINKLE. That is in line 2?

Mr. WILLCOX. Line 2; yes, sir.

Mr. BROWN. Just for my own information, because we have a little of that problem, this "Indian hemp" includes marijuana, does it not, Doctor?

Dr. PARRAN. I beg your pardon.

Mr. BROWN. Marijuana comes under "Indian hemp"?

Dr. PARRAN. Yes, sir.

Mr. BROWN. That is one of the derivatives?

Dr. PARRAN. Yes, sir.

Mr. WILLCOX. There is no change in the following paragraph, subsection (k), except a deletion of the phrase "as defined in this chapter" which is inappropriate in the code.

Mr. BULWINKLE. That is in the existing law.

Mr. WILLCOX. That is in the existing law; yes, sir.

Mr. BULWINKLE. Would you mind giving the section?

Mr. WILLCOX. I have the code reference here, 21 United States Code, section 221 (b).

That brings us to title II, Administration.

The first section of that title is a composite really of two provisions of existing law. Again giving United States Code reference, they are sections 2 and 11 of title 42. The provisions are that the Public Health Service shall be under the jurisdiction of the Federal Security Agency until otherwise specifically provided by law, and the Surgeon General of the Public Health Service, under direction of the Federal Security Administrator, supervises all matters in connection with the Public Health Service.

I might say in connection with that section that when it was drafted, we intended that it should be applicable throughout the whole code or law, and we have not specified at other places that the Surgeon General shall be subject to the supervision and direction of the Administrator.

Some question has been raised whether that is adequate to carry through the bill, and it may be that some change in the language would be desirable for that purpose.

I may say at this point also that existing law is rather diverse in the way in which the responsibilities are placed. Some of them are placed on the Service, some of the laws place the responsibility on the Surgeon General, and in some cases they create divisions in the Service and place the responsibility apparently on the division.

We have in the code undertaken to place all responsibility primarily in the Surgeon General, subject to this general provision of section 201.

Mr. BROWN. May I inquire, Mr. Chairman, what was the status of the Public Health before it was placed under the Federal Security Agency?

Mr. WILLCOX. It was a bureau under the Treasury Department.

Mr. BROWN. It was under the Treasury Department?

Mr. WILLCOX. That is right, sir.

Section 202 contains a very slight change from section 1 of Public, 184. That is the bill that was enacted last fall.

Mr. BULWINKLE. Do you have those changes made at the time when we will consider it, so that we can have before us the changes that were made at that time and possibly have them just reenacted, unless having them amended, unless it is absolutely necessary?

Mr. WILLCOX. Mr. Chairman, I am not quite clear what is the best way to try to present that. You mean in the form of the Ramseyer—

Mr. BULWINKLE. No; don't bother about the Ramseyer rule here. Here is what I was thinking. That has already become a law.

Mr. WILLCOX. That is right.

Mr. BULWINKLE. That is Public, 184.

Mr. WILLCOX. Yes, sir.

Mr. BULWINKLE. Now, the easiest thing to do, if that is satisfactory and it does not need any amendments, as it exists at the present time, is to follow that. If we have to change those paragraphs back to that, we can do that. We will have to have it so that we will know what we are doing. You may go ahead with this and explain it.

Mr. WILLCOX. All right. I am only puzzled to know what is the best way to present this, because it is a little complex in relation to the existing provisions. The only substantial change in section 202 is the addition of the last sentence which authorizes the Surgeon General to delegate to members of his staff any of the powers and duties, other than the making of regulations. That is in a sense correlative to a change I spoke of before which vests all of the authority and responsibility primarily in the Surgeon General.

Mr. PRIEST. And that is the only substantial change in the language in Public, 184?

Mr. WILLCOX. That is right, sir.

Mr. PRIEST. Thank you.

Mr. WILLCOX. And now, in section 203, that involves some rearrangement and simplification of existing material.

The sections of existing law from which 203 has been derived have been parceled out, in a sense, so that some of those provisions also occur in section 208 (a) and 209 (b).

Section 203 provides for the Commissioned Corps generally.

Section 208 (a) relates to the appointment of personnel in the Commissioned Corps, and 209 relates to pay and allowances.

Those three subjects are interwoven in existing law and we have attempted in this revision to systematize the provisions of the present law.

I might say that the provisions of existing law which are picked up in those three sections I have referred to—I refer again to the United States Code reference, title 42—are sections 12, 13, 18, 18 (a), and 38.

There are a number of points that I think that I should call to the committee's attention in this connection:

The first, and most important, is an omission in the language of the bill which the Budget Bureau has recommended be restored and which we accordingly recommend be restored.

Mr. BULWINKLE. Where is that?

Mr. WILLCOX. The present law in regard to the Reserve Corps which is in section 18, title 42 of the United States Code, provides: "For the purpose of securing a reserve for duty in the Public Health Service in time of national emergency there shall be organized," and so on.

The bill provides merely—

Mr. BULWINKLE. What page?

Mr. WILLCOX. Section 203 on page 4—merely that the Commissioned Corps in the Service shall consist of commissioned officers of the Regular Corps and commissioned officers of the Reserve Corps. In other words, it omits the qualifying phrase "for the purpose of securing a reserve for duty in the Public Health Service in time of national emergency."

I should point out, I think, that existing law also provides that members of the Reserve Corps may be called to active duty at any time, so that while the purpose of creating the reserve is stated to be service in time of national emergency, there is no corresponding limitation on the authority to call out members of the reserve to active duty.

In drafting the bill, we thought that first provision could probably be omitted as merely a declaration of purpose, but on further consideration, I think probably the omission did have some effect and that would be a change of existing law, which, as I say, the Budget Bureau has urged us to reconsider. I leave that, of course, for the committee.

Mr. BULWINKLE. Will you have the amendment drafted so that you can present it to the committee?

Mr. WILLCOX. Yes, sir. The next change I should mention is in section 208 (a) on page 8 and I say I am taking these sections together, because they pick up different pieces of the same part of existing law.

The act of 1889 which appears at section 12 in the United States Code speaks only of medical officers. The Parker Act of 1930, appearing in section 38 in the United States Code, without repealing the earlier act adds the words "dental," "sanitary engineer," and "pharmacy." So that the present law specifies the four subjects as the fields in which personnel for the Commissioned Corps may be chosen; that is, medicine, dentistry, sanitary engineering, and pharmacy.

Section 208 (a) would add other specialties related to public health.

Mr. PRIEST. Mr. Chairman, may I ask one question there?

Mr. BULWINKLE. Mr. Priest.

Mr. PRIEST. Is there a fairly good definition of what these other specialties might be? That is a pretty broad term.

Mr. WILLCOX. That is a pretty broad term. No, there is no definition in the bill.

Mr. PRIEST. I know that is not in the bill. I mean, is there any in the mind of the administration?

Mr. WILLCOX. We have stated in our report that it was intended to include other persons of comparable qualifications to those otherwise eligible: Entomologists; zoologists; physiologists; bacteriologists; perhaps persons who might not have an M.D. degree, and who might not otherwise qualify under the more specific terms, but it is



not intended to go outside of the field of persons with corresponding technical qualifications.

Mr. SCOTT. In other words, your intentions are to limit it to those with certain scientific qualifications?

Mr. WILLCOX. That is right.

Mr. SCOTT. Rather perhaps than some person connected through social-service work, or something of that sort?

Mr. WILLCOX. That is right. There is a provision of the present law authorizing up to three persons a year to be taken in. That was added by the Parker Act in 1930 and those persons, I think, have not been limited to the four fields that are generally specified in the existing law for membership of the corps.

Mr. BULWINKLE. It seems to me, though, that that is a rather broad term, specialist. Specialists related to the public health?

Mr. WILLCOX. The wording is rather broad, sir, and it may be that a more limited phrase could be used. We have not thought of any that seemed to cover what was desired and we left it this way rather—

Mr. BULWINKLE. You could put "other scientific persons related to the public health" in?

Mr. WILLCOX. The word "scientific" might help.

Mr. BULWINKLE. That is, if that is what you state you are referring to.

Mr. WILLCOX. You might ask Dr. Parran.

Dr. PARRAN. I have no objection to further limitation. Perhaps it would be and could be narrowed even more, Mr. Chairman, if that clause were to read, "or related scientific specialties in public health."

Mr. PRIEST. I think that is much better.

Mr. BULWINKLE. Or other related—

Dr. PARRAN. Take out the word "other" and take the last clause in line 18, section 208, and add "related scientific" so that it will read "or related scientific specialties in public health."

Mr. SCOTT. Or "related scientific specialties."

Dr. PARRAN. "In public health," or "public health."

Mr. BULWINKLE. You would have to change that "or" to "and."

Dr. PARRAN. In line 16, the bill provides "in one or more of the several branches."

Mr. BULWINKLE. That is right. All right, sir, you may proceed.

Mr. WILLCOX. Under the present law there is a requirement that medical officers be appointed after passing a satisfactory examination. I believe the present law does not in terms make that requirement applicable to the other classes of appointees. This would extend that requirement, as has been done in practice, to make it applicable to all persons eligible for the service, for the commissioned corps. Examinations would be required of appointees for the Reserve Corps.

Mr. BULWINKLE. Just the same as for the Regular Corps?

Mr. WILLCOX. As for the Regular Corps, except that the examinations need not be prescribed by the President. In the case of the Regular Corps, the examinations governing appointment are pursuant to regulations of the President.

Mr. BULWINKLE. What section is that?

Mr. WILLCOX. That is in 208 (a) (1), for the Regular Corps, and (2) for the reserve corps on page 8.



MR. BULWINKLE. Well, why the difference? May I ask Dr. Parran? You have examinations for the Regular Corps. Why not for your Reserve Corps?

DR. PARRAN. I frankly do not know the answer to the question. I think there is much reason to have the regulations prescribed in the same manner for both the Regulars and the Reserves.

MR. WILLCOX. I think I was wrong in saying that that was not in the present law with respect to the Reserves, Mr. Chairman. I overlooked that provision, and I see no reason why it should not be changed to make the two consistent. I think the two should be consistent. It would be easier than to have two different sets for the same proposition.

DR. PARRAN. That would be entirely agreeable, Mr. Chairman.

MR. WILLCOX. There is this difference still, Mr. Chairman, that the examination in the Regular Corps must be in one or more of the listed branches of learning. In the Reserve Corps there is no specification of subject matter. That is in accord with the present law.

There are two provisions in the existing statute which apparently have been superseded, without being expressly repealed, and they are omitted in the code. One is the provision that members of the Reserve Corps are not exempted from military or naval service. That has been rendered obsolete by an interpretation of the Selective Service Act.

The other provision is that members of the Reserve shall be distributed in the several grades in the same proportion as obtained on October 27, 1918, among the commissioned medical officers of the United States Public Health Service. That has been superseded by the provisions of Public, 184.

In section 209 (b) it is provided that the Reserve officers shall receive the same pay and allowances when on active duty as commissioned officers in the Regular Corps, and that is a continuation of existing law.

There is, however, one slight change in regard to the Reserve Corps which would be made by section 203. All active service in the Reserve Corps would be counted, when a Reserve officer is subsequently appointed in the Regular Corps, in determining his right to promotion. The present law provides that active service in the Reserve, when an officer is called out for training or to determine fitness for appointment in the Regular Corps, shall be counted, but it does not seem to include service of Reserve officers, for instance, under present conditions when many of them are in active service.

I should, perhaps, also mention that a new grade was added by Public, 184, the grade of junior assistant, corresponding to second lieutenant in the Army, and that is incorporated in section 208 (a) (1).

Those are the principal points, I think, in which there are changes from present law in regard to the matter of the organization of the commissioned corps, appointment, and pay. I will pick up the minor points as we come back to these sections later.

Turning, then, to section 204.

MR. SCOTT. May I interrupt you for a minute? In connection with your comments as regards pay and benefits, is it your thought that the comments later on will refer to changes made in existing law? Because there seems to be some change there.

MR. WILLCOX. In regard to what sort of benefits?

MR. SCOTT. I noted that in the letter from the Budget Bureau.

MR. WILLCOX. Yes, that matter we will come to a little later.

Mr. SCOTT. The reference is made in the letter of the Bureau of the Budget, that by Mr. Appleby. You will cover that later?

Mr. WILLCOX. Yes, sir. Section 204 continues the present law and regulations with respect to the position of Surgeon General. The present law does not specify a 4-year term for the Surgeon General and does not specify that he should be selected from the regular corps.

The second sentence of section 204 is taken from the Parker Act, 42 U. S. Code, section 11 (a). That is, at the conclusion of his term, he reverts to the grade and number in the regular corps that he would have occupied had he not served as Surgeon General. That is the point on which there was some discussion yesterday.

Mr. BULWINKLE. Mr. Reece brought up that point yesterday.

Mr. WILLCOX. Yes, sir. I might perhaps mention that the limitation on appointment as being from the regular corps might, I suppose, raise some constitutional question as respects the restriction on the President's power of appointment. I am not sufficiently familiar with the law on that subject, Mr. Chairman, to have any idea whether it is a serious question or not. That has always been the practice and is included in the present regulations.

Section 205 (a)——

Mr. BULWINKLE. Wait 1 minute. While Mr. Reece is here, we have that section 204 up, Mr. Reece, in which you are interested, and which you discussed yesterday; the second sentence of that section. Do you want to say anything further about it?

Mr. REECE. Did you add anything or do you have any suggestions to make on that?

Mr. WILLCOX. No, sir; I have not. I do not know whether any of the others may have or not. I do not think I am qualified to suggest what the solution should be.

Mr. REECE. Well, if we thought that something should be done, it is something that should be given proper consideration before any definite suggestion should be made anyway.

Mr. BULWINKLE. Yes.

Mr. REECE. We can pass that phase of it on then.

Mr. WILLCOX. I have not given any further consideration to that and if we have any further recommendations we will, of course, submit them to the committee.

Section 205 (a) relates to the office of the Deputy Surgeon General. That represents a change in the title under existing law; the title of the corresponding position is Assistant to the Surgeon General. That title, we think, is somewhat confusing, in view of the fact that there are also a number of Assistant Surgeons General and in view of the common practice in the Government, the phrase "assistant to the" is not very indicative; not at all indicative of the fact that he is the second ranking officer of the Service.

We, therefore, think the term "Deputy Surgeon General" is preferable.

Mr. PRIEST. It merely changes the title and not the duties.

Mr. WILLCOX. There is a change in duty also; that is, so far as the statute is concerned, although I believe that there is no change in practice. This text would make him directly responsible for one of the four major divisions or bureaus of the Public Health Service.

Mr. PRIEST. Will you designate which one?

Mr. WILLCOX. Yes, sir; the Office of the Surgeon General.

Subsection (b) of section 205 is taken from sections 2 and 3 of Public, 184. It incorporates all of what is in section 2 except with regard to pay and allowances of the Assistant Surgeons General, that being picked up in a later section. And it takes from section 3 the provision creating the office of chief dental officer and chief sanitary engineer. It does make this change from existing law: Section 3 of Public, 184, provides, "there is authorized to be established in the office of the Surgeon General a Dental Division and a Sanitary Engineering Division, the chief of each such Dental and Sanitary Engineering Division shall be a commissioned dental officer and commissioned sanitary engineer officer, respectively, of the regular corps," and so on, and provides that they shall have the rank of Assistant Surgeon General. The change involved here is that it does away with the specific requirement that there be divisions so entitled. That is designed, if it meets with the committee's approval, to increase somewhat the flexibility of internal workings of the service, which was so largely covered in Public, 184, and is carried over here in most respects without change.

Mr. BULWINKLE. That is, you cut down the number of divisions.

Mr. WILLCOX. I do not know that it actually reduces the number of divisions. Would it, Dr. Parran? I do not know how much change is involved in practice.

Dr. PARRAN. Public, 184, has served to reduce the number of divisions, particularly in the National Institute of Health.

Mr. WILLCOX. I may say that there are a number of provisions of law that existed before Public, 184, which have not been expressly repealed, bearing on the creation of divisions within the Service, and, of course, those are superseded. I am not referring to those even though they have not been expressly repealed.

Subsection (c) is taken from section 6 of Public Law 184. An older provision of law, which has been superseded but never expressly repealed, would be eliminated by this bill.

Mr. BULWINKLE. In the repealing sections of this bill, under the title of "Repeal of Existing Law," beginning with section 609, are those provisions repealed?

Mr. WILLCOX. Yes, sir.

Coming to section 206, the first sentence relating to the grade, pay, and allowances of the Surgeon General and of the position we should now call the Deputy Surgeon General, is taken without substantial change from section 11 (a) and 11 (b) of title 42 of the U. S. Code, with the addition of the provision respecting Assistant Surgeons General which is taken from Public, 184.

In line 16, I believe the reference should be not to the Regular Army of the United States, but the Army of the United States. I think we should check the title of the Army officer referred to there. I am not certain what the technically correct title is. I do not think there is any question of the individual intended to be designated there.

Mr. REECE. I think you will find that is not correctly expressed.

Mr. WILLCOX. I am quite sure this is not correct, but I am not sure what the correct designation is.

The rest of the section spells out in somewhat more explicit terms the provisions that are now in the law, the grades being analogous to those of the Army. That is drawn from the Joint Service Pay Acts and is spelled out here in the same way, substantially, that it is in the existing regulations under those acts.



Mr. SCOTT. Mr. Willcox, I suppose this is heresy, and especially from a new member of the committee, but I have never been able to understand why you have held on to this phrase "passed assistant." That is extremely confusing to me, and I am a Philadelphia lawyer of 22 years' standing.

Mr. WILLCOX. It took me some time to understand what these grades were and how they corresponded to the Army. The reason for the nomenclature, I cannot say.

Mr. SCOTT. I wonder why you hang on to it. Is it just traditional?

Mr. WILLCOX. I think that is the only reason here. These are titles that have been in use for many years.

Mr. SCOTT. I wondered if there was any advantage in further confusing the public.

Dr. PARRAN. Mr. Chairman, the term "associate" would be more descriptive; and similarly in describing the junior, the term used is "junior assistant." I should think that the term "assistant" might be left out so that he would be designated merely as junior surgeon or assistant surgeon. Following civil-service practices perhaps the term "associate" is more descriptive, although this is the ancient term that has been used.

Mr. SCOTT. I would think that you might possibly at least do the Service some good if the general public were able to understand something about his rank and the meaning of the terms. I thought perhaps it had something to do with the same reasoning which leads a physician to write his prescription in such a way that no one else can understand it. Of course, I meant no offense by that.

Mr. BULWINKLE. While you are talking about it, what is the use of having "past assistant surgeon"? Why not call him "associate surgeon" and the next one "assistant surgeon"?

Mr. SCOTT. That is what you had in mind, General, in connection with passed assistant surgeon, assistant surgeon, and junior assistant surgeon.

Dr. PARRAN. Yes, sir.

Mr. SCOTT. It certainly seems to me that that would be clearer and simpler, if there is no objection.

Mr. BULWINKLE. Just strike out the words "passed assistant," then.

Mr. PRIEST. And insert "associate."

Miss SWITZER. Mr. Chairman, may I say something to that?

Mr. BULWINKLE. Yes.

Miss SWITZER. I do not know whether Dr. Parran is familiar with this little incident, but a number of personnel people in the Federal Security had the same observations to make that the committee has and I did a little indirect inquiring as to how much feeling there was on the subject of changing the title of the grades, and I found there is quite a considerable attachment to the traditional titles among many of the officers to whom I spoke. So I took no further action in it and we just let it ride along.

I do not know how much feeling there is among the officers who hold the titles, traditional attachments to them, but perhaps more than one would expect.

Mr. BULWINKLE. It would make it a little simpler for them though if they had to write it.

Miss SWITZER. Yes; it would.

Mr. PRIEST. As a matter of fact, however, in my opinion, so far as confusing the public is concerned these titles are not so frequently pub-



lished in the press or talked about by the public. I doubt if there is very much confusion in the public mind, over whether they are called passed assistant grade, or associate grade. Maybe there is, but I doubt it very seriously.

Mr. BULWINKLE. If he has to write all that out, it would save him some time.

Mr. PLIEST. It would save him some time.

Mr. BULWINKLE. All right, you may go ahead.

Mr. WILLCOX. Subsection (b) of section 206 is a composite drawn from sections that appear in title 42 of the U. S. Code, sections 18, 34, 35, and 36.

There is no change in existing law involved, however, except the specifications, in the last sentence, of the suffix for Reserve officers. That is taken from existing regulations.

Section 207 (a) is new matter. Dr. Parran spoke of that yesterday.

Subsection (b) is drawn, the first part of it, from section 22 of title 42 of the U. S. Code.

Mr. BULWINKLE. Before you get on that other, Mr. Willcox, I think for the benefit of the record, because this will be printed, and the committee will read it, I think you should, regardless of what Dr. Parran said yesterday, you should explain that 207 (a) so that your remarks are in the record.

Mr. WILLCOX. I can explain the effect of it.

Mr. BULWINKLE. Yes. You said that it was new matter.

Mr. WILLCOX. It provides that the President, when he finds it necessary for important temporary work, may establish temporary positions and fix the grades which are applicable to officers assigned to such positions, while so assigned; and the officers are to receive the pay and allowances of the grades so fixed for such assignments. There is the limitation that not more than three such positions at any one time shall have the grade of assistant surgeon general. That is, corresponding to the grade of brigadier general in the Army, the Surgeon General is to assign commissioned officers to such positions.

Mr. REECE. How many officers does the Public Health have overseas?

Dr. PARRAN. Approximately one-third of our total strength have been assigned for duty with the Army, Navy, or Coast Guard, since the beginning of the war. Of those it is difficult to know exactly, in respect to some of them, whether they are now overseas or not.

Recently the Coast Guard has asked for a considerable number of medical officers to be assigned to their larger landing craft.

Mr. REECE. Are their duties—and you have indicated it—with the Army and Navy personnel or with the civilian population of the other countries?

Dr. PARRAN. There are many kinds of duties which these men are performing, the largest from the standpoint of volume is the medical service to the Coast Guard, officers being both here and at sea, or overseas on such duties.

The second largest is with the Army. In that connection we have men serving with theater commanders. We have other men serving with the Ordnance Department. We have still others serving with the Civil Affairs Division under General Hildring and perhaps others still on research matter, with the Typhus Commission overseas.

Except for the ordnance work on which we have two men assigned here in this country, the others are performing several kinds of duties in various theaters.

Mr. REECE. Is there a considerable percentage of them with the Civil Affairs?

Dr. PARRAN. I think about 12 or 14. Some of them are now in Italy and Sicily.

Mr. REECE. I will tell you the thing that brought that to my mind at this particular time, and it has no relation to it as a matter of fact, was a letter that I received this morning about the large number of goiter cases among the children in the Appalachians, particularly among the girls, and how little was being done to ascertain the condition and remedy it, and this letter went on to emphasize what great source of manpower, of old time Anglo-Saxon stock that was being very greatly undermined by reason of the lack of proper health conditions in those areas, and I know about that, and I was impressed with that fact. Then, in reading this bill, that phase of it came to my mind. While we have our public health units in those counties, I do not know just whether those units have facilities for doing the job that this letter referred to. The writer was not discussing it with a viewpoint of making suggestions that anything particularly should be done, but I was impressed with the importance of it, and if you do not mind, has the Public Health made any particular study of goiter conditions in certain areas of the United States and made any particular plans for control?

Dr. PARRAN. We have, Mr. Reece; beginning about 15 years ago a Nation-wide study was made. Our officers also participated in the study of the causation of goiter. Its prevention is a relatively simple matter, as you know.

Mr. REECE. Yes.

Dr. PARRAN. That is, the inclusion of a small amount of iodine in the salt used will completely prevent further development of the condition. So far as the cases which have already occurred, that presents a more difficult problem, of course.

Mr. REECE. I read an article the other day that a new treatment had been developed which was very effective. I do not recall what the name of it was. I believe I read it in the medical section of Time or Newsweek.

Dr. PARRAN. That article has escaped my attention.

Mr. REECE. There is no particular reason why I should be discussing this here, I presume, but there is a great deal of public health work that needs to be done in certain sections of our own country. Of course, I know about that section down there. And, I hope that with these relatively very considerable sums of money that are being expended on public health, that these people of ours—I mean people who are so located that they are not able to avail themselves of the results of certain types of work that is done except in a remote way, might themselves be made the subject of study and become the direct beneficiaries of the research and facilities that are made available for that purpose, because after all, in this area to which I am referring, only a small percentage of the people are reached and are materially benefited by the services of this service and I am inclined to think there ought to be some way evolved by which that condition could be

remedied; and I am not bringing this out in a way of criticism or anything like that.

I think the Public Health Service has done a wonderfully fine job to have gone as far as it has, but I cannot refrain from emphasizing that there is much work that needs to be done here among our own people, which ought not to be lost sight of, before we go too far in studying and working with the civilian population of other countries, because when the crisis again comes, it is these people who are going to constitute the strength of our Republic.

Now, having expatiated at some length, I do not presume any answer or comment; neither one are required.

Mr. PARRAN. I find myself in agreement with the statement made, Mr. Reece. I know also that we have here this morning the chairman of the committee representing the State health authorities of the country.

(Thereupon, at 11:55 a. m., the committee adjourned to meet at 10 a. m., of the following morning, Friday, March 3, 1944.)





## PUBLIC HEALTH SERVICE CODE

FRIDAY, MARCH 3, 1944

HOUSE OF REPRESENTATIVES,  
SUBCOMMITTEE OF THE COMMITTEE ON  
INTERSTATE AND FOREIGN COMMERCE,  
*Washington, D. C.*

The subcommittee met at 10 a. m., pursuant to adjournment, in the hearing room of the committee, New House Office Building, Hon. Alfred L. Bulwinkle presiding.

Mr. BULWINKLE. The committee will come to order. You may continue, Mr. Willcox.

**STATEMENT OF ALANSON W. WILLCOX, ASSISTANT GENERAL COUNSEL, FEDERAL SECURITY AGENCY; ACCOMPANIED BY STANLEY L. DREXLER, UNITED STATES COAST GUARD—Resumed**

Mr. WILLCOX. Mr. Chairman, I would like to have the record show that Lieutenant Drexler, who is participating with me in this presentation, is a former member of the general counsel's staff of the Federal Security Agency, who is very familiar with this material and has helped us a great deal on it, and who has been very kindly made available for the time being by the Coast Guard, to which he is now attached.

Mr. BULWINKLE. All right, we are glad to have you here, Lieutenant. You had gotten to page 7, section 207.

Mr. WILLCOX. Yes, sir. I think I had finished all I proposed to say about section 207 (a). Unless you want me to discuss that further, I will go on with section 207 (b).

The first sentence of this subsection is derived from title 42, section 22 of the United States Code, which authorizes the Federal Security Administrator to assign commissioned officers, or when they are not available, other competent persons, to take charge of certain divisions of the National Institute of Health.

Section 3 of Public Law 184 authorizes the detail of commissioned officers to serve as chiefs of divisions without limitation to the National Institute of Health.

The first sentence of this subsection of the bill may be a slight broadening of existing law, in that noncommissioned personnel would be made available without regard to the condition, specified in existing law, that there be not commissioned personnel available, and without limitation to the National Institute of Health. In other words, this is an over-all provision, but I would call attention to the fact that another section of the bill, 205 (b), assigns the Assistant Surgeons General to be the heads of the respective bureaus in the Service, so that this provision insofar as it relates to noncommissioned personnel

would apply only to the administrative units at levels below the bureaus. That applies equally to reserve officers as well as to officers of the regular corps; but that is apparently no change from existing law.

The second sentence of the subsection picks up a further provision from 42 United States Code 22, and adds a provision that is also taken from section 3 of Public Law 184, that chiefs of divisions while serving as such, should hold the grade and receive the pay of medical directors. There is a limitation in Public No. 184 that no more than six officers hold temporary promotions under that authority at any one time and that has been omitted in the bill.

Mr. BULWINKLE. Why was that omitted, Mr. Willcox?

Mr. WILLCOX. I think I shall ask Dr. Parran to comment on that. I am not sure that I know the particular reason.

Dr. PARRAN. Mr. Chairman, this provision was written several ways and in some drafts that limitation was placed in the language and in others it was not.

It was with the view, I think, anticipating the long-time operation of the code and the fact that more than six might need to be appointed. We have more than six operating divisions now under what in effect are the four bureaus, but in the case of some of the men assigned as chiefs of these divisions, they have acquired the grade of medical director as a result of length of service. So that the temporary promotion of the six applies to those officers now serving as chiefs of divisions who have not had as much as 26 years of service. In other words, this provision as written in Public Law 184 does not restrict the number of divisions. It restricts, were it continued, it probably would result in the assignment of the older men, men with longer service, while the actual needs of the position might be for young men, who while serving would be entitled to temporary promotion to the grade of medical director.

Mr. WILLCOX. The next, section 208, picks up the provisions respecting appointment of personnel that are now scattered through several provisions of the law.

I have already discussed subsection (a) of that section, to some extent, in connection with section 203 of the bill. There are one or two points I think I should add here, however.

The bill would authorize the making of original appointments in the Regular Corps in the grades of what are now described as junior assistant, assistant, and passed assistant. That, I believe, constitutes no change of exiting law, although there is still on the statute books an early provision which did not include the grade of passed assistant. That, I think, has by implication been repealed.

Public 184 amended the Parker Act to authorize the junior grade and I think its terms imply that there should not be an examination as a prerequisite to the initial appointment. It provides that appointees in that grade should be examined not more than 1 year and within the first 2 years after the appointment.

This language of the bill would be a little clearer in that regard, in that appointees to the grade of junior would be expressly excepted from the requirement of what I may refer to as an entrance examination. It makes a slight change. The provision in Public Law 184 sets an examination period of not more than a year and not less than 2 year after entry into the service, whereas this provision, which

appears in another place in the bill, provides for an examination within 2 years.

Paragraph 2 of this subsection—

Mr. PRIEST. Mr. Chairman, may I interrupt?

Mr. BULWINKLE. Yes, Mr. Priest.

Mr. PRIEST. Before we leave paragraph 1, the last line—line 18 of paragraph 1—we discussed briefly the other day the language in there, in that provision, “or other specialties related to public health.”

Was it not agreed that it might be agreeable to substitute some language such as “or other related scientific specialties” in lieu of that?

Mr. WILLCOX. Yes, sir. I was assuming, Mr. Priest, that the change had been discussed before and need not be called to your attention again.

Mr. BULWINKLE. We want to call attention to it so as to have it in sequence in the record.

Mr. WILLCOX. Yes, sir; we made a note of that in our outline.

Mr. BULWINKLE. I also wanted ask a question, too. Will you discuss that thing of having members in the Reserve Corps without any examinations?

Mr. WILLCOX. I think it was not without examination, the point that was brought up, so much as it was that the present law prefaces the creation of the reserve with the phrase “for duty in time of national emergency.” I think that is the effect of it. I do not have the exact wording here, and that, I understand, was tentatively agreed should be restored. We have not drafted language incorporating that in this section. It may involve a little rearrangement of the provisions of the subsection.

There is one other point, in which a change in this provision has been discussed, and I believe tentatively agreed upon. That is in paragraph (2) that the phrase “as prescribed by regulations,” the parenthetical phrase there should be changed to be “regulations of the President,” which would be consistent with the present law.

There was a provision in regard to the Reserve relating to the distribution of the Reserve officers in the various grades of the Service. While that has never been expressly repealed, it is superseded by Public 184, and we, therefore, left it out of this provision.

Turning then to subsection (b) of section 208, that is substantially the same as the present law contained in Forty-second United States Code, section 41. There are one or two changes, and we suggest revisions in this language. If you will look at line 2, on page 9, you will see it reads—

whenever commissioned officers of the service are not available for the performance of duties requiring highly specialized training and experience.

The present law reads “permanent duties,” and we suggest the word “permanent” be inserted. The present law reads also, after the phrase I have quoted, “in scientific research.”

This suggestion here is not to restore those words but to insert the words instead “in special fields related to the public health.”

Mr. PRIEST. That is in line 3, after the word “experience”?

Mr. WILLCOX. Yes, sir; this change would somewhat broaden, I suppose, the language of existing law which is “in scientific research,” but it would be more restrictive than the language now in the bill which contains no such a limitation.

Mr. PRIEST. In special fields related to public health.



Mr. WILLCOX. "In special fields related to the public health" is the phrase we had suggested.

The only other change is a mechanical change, really, I think. It would authorize the appointment under this subsection in grades above that of passed assistant. The present law reads "grades above that of assistant."

I think the reason for that change is simply that original appointments may now be made up through the grade of passed assistant under the general provisions.

Subsection (c) Dr. Parran referred to in his opening statement. That is drawn from the National Cancer Institute Act, but by incorporating it here it would be broadened to make it applicable to other fields as well as to cancer.

The only other change involved in that subsection is the express provision that consultants may be appointed without regard to the civil-service laws and compensation fixed without regard to the Classification Act.

That, I take it, is existing law, but it is not expressly stated.

Mr. PRIEST. I was just about to question whether that was the existing law. I am not sure about that.

Dr. PARRAN. Yes.

Dr. THOMPSON. I think that is the present law.

Mr. PRIEST. We frequently run into controversies on it on the floor, and on that very provision. It has happened a number of times in connection with other bills, and I was just wondering if it was existing law in this case and if we had that precedent to back us up on it.

Mr. WILLCOX. Ordinarily, sir, consultants are not considered as employees of the Government subject to those laws. I am not personally familiar with the ruling on this particular provision.

Mr. BULWINKLE. You say that that is taken from the National Cancer Act?

Mr. WILLCOX. Yes, sir.

Mr. BULWINKLE. They had to do that, because you could not have consultants classified by the Civil Service.

Mr. PRIEST. You understand, I am in favor of the provision as it is, but I wanted to be sure, if we run into it on the floor, as we sometimes do, that we had something by precedent or law to back us up.

The Civil Service Committee of the House is a very fine committee, and they watch these things very closely.

Mr. WILLCOX. I believe that both in that section and in the following section relating to the appointment of fellows, where we have spelled that out, it is a part of the existing law. I would like to ask the Surgeon General about that.

Dr. PARRAN. Mr. Chairman, we have appointed from time to time special consultants for temporary and intermittent service. That is the only purpose. I am not familiar with the exact situation of the law under which that is done. It is for temporary and intermittent service that we would wish to continue the present policy.

Mr. WILLCOX. Subsection (d) relates to the appointment of fellows. There are two existing authorities relating to that, the one in the National Cancer Institute Act relating to cancer and the other which is now in section 23 (c) of title 42 of the code relating to the National Institute of Health, and here again we have incorporated



in the text of the bill the exemptions which I understand applies under present law from civil service and classification laws.

In the case of the National Institute of Health, it is expressly provided in the present law that the scientists may be appointed for work either in the institute or in other places within the United States or abroad.

Subsection (d), I believe, makes no change of substance from existing law.

In connection with both these subsections, the point was raised during Dr. Parran's statement, of the appointment of aliens. That authority clearly exists at the present time, so far as the basic law is concerned, in the National Cancer Institute. I believe it is not expressly provided in the case of the National Institute of Health.

I should like to suggest, as was mentioned the other day, that a prohibition, that a general prohibition against the employment of aliens that may be contained in an appropriation act be not deemed applicable to these two subsections, unless made so applicable in express terms. I am not trying to suggest precise language that should be used, but I believe some such language might be inserted.

Mr. BULWINKLE. I would suggest that you gentlemen work on an amendment together with Mr. Perley, and see if you can work it out.

Mr. PRIEST. May I ask a question, Mr. Chairman?

Mr. BULWINKLE. Mr. Priest.

Mr. PRIEST. Has the subcommittee of the Appropriations Committee handling the appropriation for your agency held hearings for the next fiscal year?

Dr. PARRAN. No, Mr. Priest.

Mr. PRIEST. I was thinking when that comes up, it might be well to watch that angle before the Appropriation Committee.

Mr. WILLCOX. I think that is a very good suggestion.

Subsection (e) is based on existing law, section 40 of title 42 of the U. S. Code, I believe, but omitting a proviso which is picked up in section 215 of the bill.

There is one omission in this subsection as it is written here which I am sure is inadvertent and should be restored, I think. This does not state in express terms that the appointment should be made by the Federal Security Administrator and I do not think there is any question but that that is what was intended, and I would suggest that the language be revised to make that clear.

I think I should call attention also to the fact that the National Cancer Institute Act contains an authority which now appears in section 23 (d), title 42 of the code, to designate the titles and fix the compensation of scientific personnel. That, I take it, would be an authority to appoint such personnel outside of the classification act and the civil service laws. I believe that authority has never been availed of, certainly not recently, and it is not contained in the bill, and we are content to leave it out of the bill.

The next section, 209, relates to pay and allowances. The first subsection you will note provides merely that commissioned officers of the regular corps shall receive such pay and allowances as are or may hereafter be provided by law.

Section 37, title 42 of the United States Code, provides that the pay and allowances in the Public Health Service shall be governed by the law applicable to the Medical Corps of the Army. This provision

in the bill may in a sense be out of line a little with the basic idea of the codification, because it does, by its terms, refer to other law. The reason that was put in the bill is that the pay and allowances of the commissioned services are governed by the Joint Service Pay Acts, so-called, and those acts are uniformly applicable to all of the commissioned services.

It seemed to us when we were drafting this material that to attempt to incorporate in a codification of the Public Health Service laws the rather elaborate provisions of the Joint Pay Acts, would make a good deal more cumbersome, for instance, any future amendment of the pay scale which would presumably be made applicable again to all of the services.

So that I submit to the committee the suggestion that to this extent, it might be desirable to depart from a complete codification of the law applicable to the Public Health Service, as such.

I am not sure that it really is as great a departure as it might seem. Other provisions, for instance, such as those for the appointment of personnel subject to civil service and classification laws, of course, necessarily incorporate those general statutes by reference.

This section in conjunction with section 215 would effect one change of existing law which I believe should be called to the attention of the committee. The present law, in section 37 of the United States Code, expressly ties up the pay and allowances of the Public Health Service commissioned officers with those of the Medical Corps of the Army. Under that provision, in certain matters that are not governed by the Joint Pay Acts by their own terms, as I understand it, the Comptroller General has taken the position that the Public Health Service is automatically governed by some other statutes and by regulations that are applicable to the Medical Corps of the Army. In other words, the regulatory authority within the framework of the general pay acts is not independently vested in the agency administering the Public Health Service and in the President with respect to the Public Health Service, but is automatically assimilated to that of the Army Medical Corps. This bill would remove that restriction and would give the President the same authority to make regulations with respect to the Public Health Service that he has with respect to other services. One may suppose that in most respects he would make them uniform, but there might be instances in which the different natures of the different services would warrant some differentiation.

Turning to subsection (b) : The present law, section 18, title 42 of the Code provides that reserve officers on active duty shall receive the same pay and allowances as commissioned medical officers and that provision incidentally also appears in the Joint Service Pay Act, 37 United States Code 114, in its application to all of the commissioned services.

Travel allowances provided by 37 United States Code 112 are applicable to reserve officers on active duty as well as to regular officers and allowances for the transportation of household goods, I believe, are covered by regulations. That subsection involves no change in the present law.

Subsection (c) : The first sentence of this subsection combines the provisions of sections 19 and 31 of title 42 of the Code. I should say that this would reenact a provision in section 19 with respect to leaves

of absence which under the rulings of the Comptroller General I referred to a moment ago may be considered as obsolete at the present time. That is the authority to make regulations for the Public Health Service concerning leaves of absence.

The second sentence of this subsection is taken without any substantial change from section 32 of the Code.

I believe there is a slight inconsistency between this subsection and section 215, which I will come to in a few moments, and to correct that I would suggest that in the first line it read, "In accordance with regulations of the President." In other words, the subject matter here involved is one which falls into the sphere which we think should be assigned to the President for the making of regulations.

Subsection (d) is new law. It was designed to obviate some doubt, rather serious doubts, that have been raised by certain rulings of the Comptroller General regarding the entitlement of female officers to the allowances which normally go to persons with dependents. The dependency allowance statutes, as I recall, are written in terms of payments for a wife and the Comptroller said, what is rather obvious, that a female officer could not have a wife. This would give female officers somewhat less in the sense that it would not determine dependency by law but rather leave it as a question of fact, basically, the controlling phrase there being, "who is not in fact dependent."

Mr. SCOTT. Are there any female commissioned officers in the Service now?

Mr. WILLCOX. There are a few; I do not know how many.

Dr. PARRAN. Eight or ten regular and reserve together.

Mr. BULWINKLE. Are all of them married, Doctor?

Dr. PARRAN. No.

Mr. SCOTT. Do you have any trick name for them, like the other services have?

Dr. PARRAN. No; they are a part of the regular and reserve corps and are on an equivalent standard, except as regards this question of dependency.

Mr. WILLCOX. Subsection (f) relates to the employment of what I think are referred to as contract doctors, who do part-time work.

It involves no change from existing law, title 42 of the Code, section 67, except that it authorizes the fees for certain services to be fixed by the Surgeon General, whereas the present law requires that determination to be made by the Federal Security Administrator.

Mr. BROWN. What are the present fees?

Mr. WILLCOX. I cannot answer that.

Dr. PARRAN. This provision covers a very considerable number of employees who have very varying duties. In some of the smaller ports we employ them at varying rates, perhaps \$25 a month, or \$50 a month, local doctors to treat our beneficiaries, sailors, Coast Guard men, and so forth.

In addition we may wish to use that doctor for purposes of inspecting the occasional vessel which needs quarantine inspection.

Mr. BROWN. You are talking about section (e), page 11?

Mr. WILLCOX. Section (f), page 11. And it has seemed more economical to the Government to have this combination of specific fees for specific tasks connected with, let us say, quarantine.

Mr. BROWN. Doctor, does it increase the compensation?

Dr. PARRAN. No, sir.



Mr. BROWN. That is all I have to ask.

Mr. BULWINKLE. (e) is practically the same as existing law?

Mr. WILLCOX. I think I overlooked mention of that subsection. I think there is no substantial change in that, but it merely consolidates two provisions to the same effect, and is applicable to the two advisory councils.

Mr. BULWINKLE. All right.

Mr. WILLCOX. Subsection (g) continues an existing provision of law, though with slight changes.

The present statute, which is found in 125, or title 42 of the code, relates to any commissioned or noncommissioned officer of the Public Health Service detained for duty at the leprosarium at Carville, La., or engaged in investigations of leprosy in Hawaii.

This section as drafted would include noncommissioned employees as well as noncommissioned officers. I take it that would mean lower grades. It would relate to any person, any such person, whose duties required him to be in close contact with persons afflicted with leprosy, regardless of whether it may happen to be in Carville or in Hawaii. It would make a change, however, in that the present law gives an automatic 50 percent increase of pay to such persons. This bill would make the increase discretionary with the President, but not to exceed one-half of the pay.

Mr. BULWINKLE. Let me ask, Dr. Parran, just out of curiosity, have many members of the Public Health Service ever contracted leprosy?

Dr. PARRAN. I do not know of any who have contracted leprosy, Mr. Chairman.

Mr. BULWINKLE. How long have you had this service on your hands?

Dr. PARRAN. In Hawaii, since shortly after the Territory was acquired. At Carville, La., the Carville Institution has been in operation, I think, about 20 years.

I am just told by Mr. Felton we recently have had one case of an employee of Carville who seemed to have developed leprosy.

Mr. BULWINKLE. How many patients have you at Carville?

Dr. PARRAN. Around 350.

Mr. BULWINKLE. How many in Hawaii?

Dr. PARRAN. The Public Health Service activities there have not been in connection with operating the leper colony for the care of lepers but in the field investigations and examinations in clinics; examinations in order to locate infected cases so that they may be admitted to the leper colony.

Mr. BULWINKLE. Do you have Public Health officers at the Louisiana hospital?

Dr. PARRAN. Yes.

Mr. BULWINKLE. How many do you have down there, total personnel and all officers?

Dr. PARRAN. I do not recall that offhand, Mr. Chairman. The ratio is somewhat less than in the more active general hospitals. In addition, the nursing at Carville is provided by an order of nursing sisters. That plan was in operation when the institution was operated by the State of Louisiana and has been continued and they are not employees of the Public Health Service.

Mr. SCOTT. General, do you use this chaulmoogra oil in treating leprosy?



Dr. PARRAN. Yes; we have.

Mr. SCOTT. What has been the effect of that? I am just asking as a matter of curiosity. Has it retarded it?

Dr. PARRAN. The results have been disappointing.

Mr. SCOTT. Disappointing?

Dr. PARRAN. Yes, sir.

Mr. WILLCOX. Subsection (h) of this section is taken from the National Cancer Institute Act without substantial change, but in accordance with the change in section 208 would become applicable to fellows throughout the service.

Section 210 of the bill relates to the promotion and separation of commissioned officers. The introductory language—that is, the first seven lines down to the exceptions—are taken without any substantial change from the Parker Act, which appears in section 37 of the U. S. Code, title 42.

Mr. BULWINKLE. Will you explain for my benefit as well as those members of the committee who are interested, what you mean by “substantial change?” Are you going to show that?

Mr. WILLCOX. The changes that I have referred to that way, sir, are such changes as rearrangement of the order of the phrases to try to make a sentence read more smoothly; or on a few occasions, which I think I have pointed out, where there are two overlapping sections in the present law we have tried to avoid the repetition.

Mr. BULWINKLE. All right, sir.

Mr. WILLCOX. Turning to the exceptions that are numbered in this subsection, the first is derived from section 4 of Public, 184, omitting two provisions that are in that subsection. One related to what I think may be described as a ratification by Congress of certain promotions which had been made theretofore and of which the validity was in some doubt. That provision seems to have been executed, and there is no need, as far as I can see, to carry it into permanent legislation. It also omits—and I think this omission may be inadvertent—a provision in section 4 obviating the necessity of taking a new oath in case of such temporary promotion.

Mr. PRIEST. Do you think that should be included?

Mr. WILLCOX. I think that might well be included.

Mr. PRIEST. That is in section 4 of 184?

Mr. WILLCOX. That is right, sir.

Paragraph 2 is taken from section 37 (a) of the code. There is only one very slight change. I should say, rather, there is one omission of a provision which in the main is excluded as obsolete. I say “in the main,” because there is one aspect of it which we will want to bring up in connection with the retirement benefits when we reach those.

Generally, that was a provision relating to certain officers who became eligible at the time of the enactment of the Parker Act for the commissioned corps, and provisions were written into the Parker Act to give them certain credit for the service they had had as civilian personnel before they were commissioned persons. This relates to dentists, sanitary engineers, and pharmacists, who had not been eligible for the commissioned corps before that time.

I believe that with regard to promotions, any benefits that were derived from that provision are already executed, and there is no need to carry that into the permanent law.

The third exception is taken from section 7 of Public 184, and is the provision I referred to under section 208 (a).

As I pointed out then, it makes a slight change by saying that the examination of these junior officers should be after not more than 2 years of service instead of saying not less than 1 nor more than 2 years. It also omits the express provision that those who fail to pass the examination should be separated from the service, and I suggest that this be inserted in the bill.

These exceptions numbered 1, 2, and 3, do not include an exception that appears in the Parker Act to the effect that pharmacists may not be promoted to the passed assistant grade until after 5 years of service in the assistant grade and that pharmacists may not be promoted beyond the grade of passed assistant.

We would suggest the insertion of a further exception which would cover the case of pharmacists and perhaps some other cases to the effect that commissioned officers other than medical, dental, or sanitary engineering officers, shall be promoted in accordance with regulations of the President.

I believe that would apply only to pharmacists and to that group we have referred to as "other specialists" in connection with the new language suggested in regard to the commissioned corps, the thought being that it may be inappropriate in some instances to give those persons the same rates of more or less automatic promotion that are granted to the medical members of the Regular Corps.

Subsection (b) is the same as section 5 of Public Law 184.

Subsection (c) is taken without any substantial change from subsection (c) of section 37 of the code, title 42.

Section 211 we submit might well be deleted from the bill. It relates to the promotion of Reserve officers, and I think would have no substantial effect since the President can issue a new commission to a Reserve officer and accomplish exactly the same result that would be accomplished by such a promotion.

Mr. SCOTT. The Reserve officer, in other words, does not lose his opportunity for promotion by the deletion of this subsection?

Mr. WILLCOX. No; I think it makes no substantial difference.

Mr. SCOTT. The only reason I phrase the question that way is so that the record of these hearings will show very definitely that there is no intention to interfere with any promotion of the officers.

Mr. WILLCOX. Sections 212 and 213 get into the subject of the benefit provisions of Public, 184, although they are partly based on law antedating that act. If the committee approves, I thought I might pass those sections by for the moment and continue on through the rest of title II, which is three or four more sections, and then come back generally to the topic of the benefit provisions.

Mr. BULWINKLE. That will be satisfactory.

Mr. WILLCOX. Turning then to section 214 relating to the detail of personnel: The first sentence is taken from section 17 (a) of the present law, title 42 of the code. That is a provision of the Parker Act. There are two or three changes suggested in that which I shall call to the committee's attention. I might say there are at present two—

Mr. BULWINKLE. Before you get to that, let me ask you a question. I understand then from the notes that you have given me that you

delete the words from existing law of "Public Health activity." Is that correct?

Mr. WILLCOX. Yes, sir.

Mr. BULWINKLE. In order then that there may be no question about it because of the Coast Guard, Army, or Navy detail, and it is allowed as being something else besides a Public Health activity.

Mr. WILLCOX. That is right; yes, sir. That is one of the changes.

I think another change really comes into the following sentence, which permits greater flexibility in the financial arrangement that may be made in connection with these details. There is some doubt at present whether the general and quite flexible provisions of the Economy Act governing interdepartmental details generally are applicable to the Public Health Service, in view of this more specific authority in the Parker Act. This bill would in effect give the same flexible authority in that regard that is contained in the Economy Act.

Subsection (b) was referred to in the testimony of Dr. Riley yesterday. It has to do with the detail of Public Health officers to State agencies, State and local agencies, and we concur in his suggestion that the language be changed by striking the words "or political subdivision thereof" and substituting the words "health authority."

I believe that would require a slight change in line 10, because there the reference to political subdivisions would not be quite clear, and I would suggest instead of "political subdivision" we say "or any political subdivision thereof."

Mr. SCOTT. Making it read how?

Mr. WILLCOX (reading):

Upon the request of any State health authority, personnel of the Service may be detailed by the Surgeon General for the purpose of assisting such State or any political subdivision thereof.

Mr. BULWINKLE. Let me just ask you this: Why do you leave the word "political" in there? Why not just say "subdivision thereof"?

Mr. WILLCOX. That is the common phrase, Mr. Chairman. I do not know that I can justify it. I suppose it means governmental subdivision as distinguished from geographic. I do not know; I do not quite know what the reason is as to why that phrase is used so often. It was not used in one sense of the word "political."

Mr. BULWINKLE. It seems to me that it should be left out, because it is totally unnecessary. If the health authorities ask for it for any part of the State you are going to send them there, and it does not make any difference whether it is a town, a city, a township, a county, or what it is.

Mr. WILLCOX. Unless Mr. Perley can think of a better reason than I can, I would be quite content to drop it out.

Mr. BULWINKLE. I do not see any reason much for it, or what the purpose of it is. "Such State" is all that is necessary, and the work that it relates to.

Mr. WILLCOX. I suppose that the detail to, for instance, a county health authority might raise some question whether that was for general State purposes. I think it is, but I feel it is a little clearer if it is referred to.

Mr. BULWINKLE. All right. I should think that you could strike it out and put in "any subdivision thereof." The other seems to be unnecessary.



All right, sir, you may proceed.

Mr. WILLCOX. Subsection (d), after the first two lines——

Mr. BULWINKLE. Why have you skipped (c)?

Mr. WILLCOX. I beg your pardon. Subsection (c) is taken from section 17 (b) of title 42 of the United States Code, with the addition of the word "nonprofit" in the second line; the words "or other institutions" in that and the following line, and the words "for instruction of students."

Mr. BROWN. Now, let me ask you about that: Would that permit the Surgeon General to assign instructors, at the expense of the Government, to, let us say, a church school, to teach medicine or nursing?

Mr. PRIEST. A church school is not a nonprofit institution.

Mr. BROWN. Oh, yes; they are.

Mr. WILLCOX. Engaged in health activity.

Mr. BROWN. Most of them are going into the red—most of the church schools.

Dr. PARRAN. The law reads, section 17 (b) of title 42 of the U. S. Code—

The Surgeon General of the Public Health Service is authorized to detail personnel of the Public Health Service to educational and research institutions for special studies of scientific problems relating to public health and for the dissemination of information relating to public health.

That last clause seemed to authorize the sort of assignment which is stated more explicitly, namely, instruction of students.

Mr. BROWN. Well, I am thinking, Doctor, that you might not always be head of the Public Health Service.

Dr. PARRAN. I expect not to be.

Mr. BROWN. I do not think any member of this committee need worry very much about what you might do in many instances; but some time, as I understand this law, it is being redrafted and codified to care for the administration of the Public Health Service for a good many years to come. This provision looks to me like it is almost as wide open as the proverbial barn door.

Dr. PARRAN. The practical intent and the way the present law has been administered is that there have been a few instances in which it seemed that one of our officers could carry out a particular study to better advantage in a school such as the school of public health of John Hopkins University.

Mr. BROWN. I am not thinking so much of officers studying as I am that a plan is perhaps being created for someone to get the idea later on that the wise thing to do is to send a Public Health officer into the various school systems of the country to teach students.

Dr. PARRAN. Such action certainly is not contemplated, and we should not object to any restrictive language.

Continuing on with my earlier thought: In connection with these investigations which our officers carry out, sometimes it seems desirable for them to give lectures to classes of Public Health officers who are in training. We have such an arrangement now at Johns Hopkins School of Public Health, where one of our officers is carrying out studies related to syphilis. He is an authority on that subject. There is a class of Public Health officers being trained for State and local health duties, including some officers of Public Health services, receiving



training there, and it seemed desirable to have him give some lectures to such students.

MR. BULWINKLE. How long does one of these or a similar detail last?

MR. BROWN. That is an important question.

DR. PARRAN. Usually for a 4-year period and then they may or may not be renewed, depending on the progress of the investigation. The decision is made in every instance depending upon how we think the best interests of the Government will be served.

MR. BROWN. Doctor, do you have any officers of the Public Health Service detailed or personnel assigned to some institution such as Johns Hopkins to teach there regularly?

DR. PARRAN. No, sir. The teaching part has been very minor.

MR. BROWN. Or lecture regularly, if you want to call it that?

DR. PARRAN. No, sir.

MR. BROWN. I can differentiate the difference between Dr. Parran going to the State university in Ohio and lecturing there on public-health problems maybe one, two, or three times, or giving a series of lectures, and establishing within that school certain instructors from the Public Health Service which the Government pays to stay there permanently or as a semipermanent thing. That is what I am talking about, and whether or not this opens the door for some future chief of the Service to come in and decide that he is going to set up a staff in all of these universities or colleges, or a part of them, over the country, and teach public health. That is another thing.

MR. SCOTT. It does seem to me that you need authority for such things as epidemics.

MR. BROWN. That is right; I agree with that; yes.

MR. SCOTT. Or such epidemics as might occur. Suppose that you had an epidemic of diphtheria, for instance, you might want to detail a Public Health officer to give some emergency instructions to students to send them out to be helpful in controlling it. There might be some other kind of an epidemic where that would be most desirable. That is the sort of thing I have in mind, that you might need the authority to do that, and might need it in a hurry.

MR. BULWINKLE. Like Mr. Brown, I do not think that the Public Health should detail a man for any length of time to any institution and let the Federal Government pay his salary and that institution gets the benefit of it.

DR. PARRAN. We do that temporarily. The committee will recall in connection with fellows, the assignment of fellowships, for work in a particular institution, because of the fact we find there, in the environment of other related research work, the most profitable place in which such a fellow can carry on his cancer studies.

MR. BROWN. The fellow is actually studying, carrying on research work.

DR. PARRAN. Yes, sir.

MR. BROWN. And acquiring knowledge and skill and training that is used for the benefit of the Government as soon as he finishes his fellowship? Is that not correct?

DR. PARRAN. That is correct.

MR. BROWN. The thing that I have in mind, and I think what Major Bulwinkle has in mind, is an officer of the Public Health Service, who perhaps has had all of this training, and instead of being a student

or a fellow, he has finished his education, or supposedly has completed his education, and then goes out and becomes an instructor and teaches these different things as a permanent or semipermanent policy in the different schools of the country.

I can see if you furnish Major Bulwinkle's schools with instruction of that type, that Mr. Scott and I may immediately come in and request assignment of such officers to Pennsylvania and Ohio schools and have the Government pay the cost of it, too. You see what I mean?

Dr. PARRAN. I can; yes, Mr. Chairman and Mr. Brown. I agree with the general point of view which the committee has expressed. I think some restrictive language could be put in here.

Mr. BROWN. I certainly do not want to stop the practice that Mr. Scott has mentioned—that is, going in and giving instructions in the case of epidemics or emergencies, or things like that. That is a proper activity of your group and should be done, but I still think that perhaps there should be some legislation which could be worked out governing this.

Dr. PARRAN. Mr. Chairman, I should be entirely agreeable to having subsection (c) use the identical language of existing law. In other words, the main change would be to eliminate the term “for instruction of students.” That leaves it so that the Surgeon General may detail personnel of the service to educational and research institutions engaged in health activities “for special studies of scientific problems relating to public health and for the dissemination of information relating to public health.”

Mr. BULWINKLE. Just like it is in the existing law.

Dr. PARRAN. Yes, sir.

Mr. WILLCOX. Yes, sir; except it would be further limited by the introduction of the word “nonprofit” which we would like to have inserted.

Mr. BULWINKLE. Just for my information and that of the committee, how would you construe that “nonprofit” as to any institution?

Dr. PARRAN. This relates to educational and research and other institutions engaged in other activities. We want to exclude the possibility of assigning officers to commercial pharmaceutical manufacturing concerns.

Mr. BROWN. The General Foods Corporation might want, for instance, to make a study of foods.

Dr. PARRAN. That is right.

Mr. BULWINKLE. I think it would be better, Doctor, the way you suggested, for instruction of students, to cut that out.

Dr. PARRAN. There is no objection to that.

Mr. WILLCOX. I do not think we quite realized the possible implications of that language, Mr. Chairman.

Subsection (d) after the first two lines is new matter.

Mr. BULWINKLE. That is the exceptions?

Mr. WILLCOX. That is the exceptions; yes, sir. That change is designed to write into the law what is, I believe, substantially the effect of some rulings under the present law, although I think those rulings may be open to some doubt.

Mr. BULWINKLE. That would provide, if a man is detailed to the State of North Carolina, that the State of North Carolina would pay

his salary and expenses, but he would not lose any of his rights under the law.

Mr. WILLCOX. That could be done. The normal procedure, I think, would still be for the Public Health Service on making the detail to continue to pay the salary, but this would authorize the other.

Mr. SCOTT. He would not be penalized so far as his status is concerned in the Public Health Service, by reason of the fact that some State wanted him temporarily?

Mr. WILLCOX. That is right.

Section 215 (a) attempts to gather up and divide the regulation making authority that seems now to be rather hit or miss in its distribution. There is a general provision in section 3 of title 42 of the code that the President shall from time to time prescribe rules for the conduct of the Public Health Service. He shall also prescribe regulations respecting its internal administration and discipline, and the uniforms of its officers and employees. There are, however, a number of specific statutes vesting the power to make regulations in the Secretary of the Treasury—now the Federal Security Administrator—some of them antedating this general provision, some of them more recent, and there seems to be no consistent scheme in the present law for the distribution of authority. There are a number of situations in which it is relatively difficult to tell whether this provision amended an earlier statute and placed in the President the authority that the statute had originally placed in the Secretary.

We suggest this line of demarcation, which comes fairly close to what seems to be generally the law now, although there are a good many exceptions to it at present. This will put in the President the authority to prescribe regulations which related to the appointment, promotion, retirement, termination of commission, titles, pay, uniforms, and allowances, including allowances for uniforms and increased allowances for foreign service, and discipline of the commissioned corps.

The Surgeon General subject to the approval—

Mr. BULWINKLE. Just a minute, before you pass from that, for my own information, in line 4, where you come to the word "titles"—we are supposed to take care of the titles in this act; are we not?

Mr. WILLCOX. Of the medical officers; yes, sir. The section relating to that prescribes the title of the medical officers, and then provides that the President shall prescribe corresponding titles, for instance for the dentists and sanitary engineers, and so on.

Subsection (b) would vest in the Surgeon General the rest, residue, and remainder of the power to make regulations with the approval of the Federal Security Administrator.

Before leaving that section, I think I should remark that the parenthetical clause in subsection (a) raises some points which I will take up in connection with the benefit provisions, the allowances for uniforms and possibly increased allowances for foreign service.

Subsection (c) picks up the proviso of the existing law—that is 42 U. S. Code section 40—which we omitted from section 208 (e) because it seemed to be more appropriate at this point.

Section 216 is based on two provisions of existing law. The first is the provision which now appears in 42 U. S. Code, section 8, reading, "The President is authorized, in his discretion, to utilize the



Public Health Service in times of threatened or actual war to such extent and in such manner as shall in his judgment promote the public interest without, however, in any wise impairing the efficiency of the service for the purpose for which the same was created and is maintained."

The effect of this bill would be to change that provision in two respects: In the first place it would substitute for the phrase "in times of threatened or actual war" the phrase "in time of actual war or emergency proclaimed by the President." That would—

Mr. BROWN. That goes back to the old question, "what is an emergency?"

Mr. WILLCOX. It does go back to what is an emergency.

Mr. BROWN. We have had a lot of them.

Mr. WILLCOX. I think the phrase, on the other hand, the phrase "threatened or actual war" is not very satisfactory. I do not believe that anyone would have wanted, right before Pearl Harbor, to say there was a period of threatened war.

Mr. BROWN. Well, the bank holiday was an emergency.

Mr. WILLCOX. That was an emergency and this phrase may be too broad.

Mr. BROWN. I do not know what the Public Health Service could have done at that time, except to give sedatives.

Mr. WILLCOX. I was going to remark that in connection with the other part of this section which is now in Public 184, this committee, as you recall, took out that phrase "in time of emergency" and this bill was drafted before that action. I think perhaps I will refer a little further to that other section and then come back to this general question of the phrase that should be used.

Subsection (c) of section 8 of Public 184 provides: "In time of war, the President may, by Executive order, declare the commissioned corps of the Public Health Service a part of the military forces of the United States and provide the extent to which it shall be subject to the Articles of War and the Articles for the Government of the Navy."

Mr. BROWN. That is an emergency, but it should be restricted to apply to emergencies, such as epidemics, disasters, catastrophes, and so forth and so on.

Mr. WILLCOX. I would suggest that we try to find some language of that sort which would make it possible to utilize it.

Mr. BROWN. I can see where an earthquake might be such a case, or a great fire, a tidal wave, or any one of many things.

Dr. THOMPSON. A flood.

Mr. BROWN. A flood; that is right; an epidemic—of course, all of those are emergencies.

Mr. WILLCOX. An epidemic, or a threatened epidemic, might be a proper phrase.

Mr. BROWN. A threatened Mississippi River flood which might not actually develop might make it necessary to organize into active service, or for the Public Health Service to be prepared for it.

Dr. PARRAN. I recognize that situations will exist such as Mr. Brown has mentioned. If in the reworking of the section relating to the utilization of the reserve corps it is made clear that our reserve corps can be used in such types of emergency and not merely in time of war, then the effect of section 216 could relate, as it does under Public 184,



to the time of actual war. The specific authorization given to the President, following the general authorization to use the service in such manner as may best protect the public interest, relates solely to constituting the Public Health Service as a branch of the military force.

MR. BROWN. Was not the Army ordered in by, I think, President Hoover when the Mississippi flood occurred back—when was it, 1930 or 1929, along in there—Hoover ordered the Army in then.

MR. BULWINKLE. Yes.

MR. BROWN. And the Public Health Service moved in. It was just too big a job for anybody else to handle.

DR. PARRAN. That is true, Mr. Brown, but I believe elsewhere in the code will be found sufficient authority to enable the Public Health Service to deal with such a situation.

MR. BROWN. And the President put the Army in command.

DR. PARRAN. At that time the Public Health Service was not under jurisdiction of the Army nor was it in the case of the last Mississippi River flood.

MR. BROWN. I see.

DR. PARRAN. In 1936.

MR. BROWN. I see. My thought is that you want to make it broad enough that you give the President all needed authority.

MR. BULWINKLE. In time of epidemics.

MR. BROWN. To meet any situation that might arise.

MR. WILLCOX. But not put it in the Army in time of epidemics.

MR. BROWN. What is that?

MR. WILLCOX. Not put it in the Army in time of epidemics, but to give this other authority.

MR. BROWN. That is right.

MR. WILLCOX. The provision at the end of the subsection is new language, although I think that it is implied in the language of the present Public. 184.

Section 217 restates without any great change the present law creating and assigning functions to the National Advisory Health Council and the National Advisory Cancer Council.

The National Advisory Health Council was created piecemeal, so far as the membership is concerned, by at least two statutes. One called for five members skilled in laboratory work in relation to the public health and another one adding five more members, skilled, I think it is, in matters related to the public health.

We saw no particular occasion to preserve that distinction between the two groups of five members, and so that language has been consolidated.

There is one new member that would be added by the bill, namely, the Director of the National Institute of Health as an ex-officio member of that council.

I believe the only other substantial change in these sections—I should not say the only other—one other is the broadening of the purpose for which the Surgeon General may utilize the service of individual members of these councils. The present law authorizes him to use individual members in connection with conference matters. That would be revised in this language to read in subsection (b), toward

the end, "in connection with matters relating to the work of the Service."

We have omitted the provision that appears in the present law regarding staggered terms in connection with the initial appointment of these council members, since those are really obsolete now.

The present provision in the National Health Council is that a person who has served a term may not be reappointed until after the lapse of 12 months. We have suggested here a provision merely that he not succeed himself. In other words, that there be not more than 5 years' continuous service in the case of the health council and 3 years' continuous service in the case of the other.

The exemption from civil-service laws is, as in the case of consultants and fellows, merely an express statement of what is clearly implied by present law.

I believe those are the only substantive changes that would be brought about. This is really a condensation of some of the provisions that have been rather scattered.

That brings us to the end of title II relating to administration. Subject to the—

Mr. BULWINKLE. I was thinking, Mr. Willcox, we will have to close in a few minutes anyhow. The full committee has to meet this morning at 11:45 and I was thinking that it might be a good idea not to start into that.

Mr. WILLCOX. All right, sir.

Mr. BULWINKLE. And that will give you an opportunity to get this up, because it has been a great help to the members of the committee. It helps us a great deal in going over it.

Mr. SCOTT. It has been a great help to us.

Mr. BULWINKLE. And the committee will then stand adjourned until Tuesday morning at 10 o'clock.

Mr. BROWN. Major, I have been out a part of the time. I thought I noticed that you were making notations on your bill as to the origin and the changing of these sections.

Mr. BULWINKLE. I am trying to do it.

Mr. BROWN. I certainly think that some of the members could have some help perhaps in making notations on the bill after we get a clean bill ready so that we can have it ready for debate and be able to answer any questions on the floor. That would help if it could be furnished to each member of the committee.

Mr. BULWINKLE. I thought what we would do, Mr. Brown, would be to have, after we get through with these hearings, when Mr. Perley is through with this vote bill, then we can have them prepare a committee print with these changes in it.

Mr. BROWN. Yes.

Mr. BULWINKLE. So that when we meet as a subcommittee we can have that before us.

Mr. BROWN. Then perhaps if we could have notations on our bills showing these changes, and so forth, just on the margin, that could be made in pencil or pen, or typewriter, that would help.

Mr. BULWINKLE. We will have in the first place to get up the Ramseyer and then that.

Mr. BROWN. I would go further than that though. There have been several explanations made, and you could make notes on that, and if

anybody raised a question we could immediately answer on the floor, give a satisfactory explanation, and perhaps save a lot of time, a lot of difficulty, and a lot of trouble. That would be very helpful.

Mr. SCOTT. On the committee print, Mr. Willcox could give us some of those notations. They could be made on the side.

Mr. BROWN. That is what I mean, just for the committee's use.

Mr. SCOTT. Showing not only what the changes are, but suggestions as to why they have been recommended.

Mr. BROWN. Yes.

Mr. BULWINKLE. We will try to arrange it so that we can get that, because there will be a great many questions asked on the floor.

Mr. BROWN. Yes sir.

Mr. BULWINKLE. We will be asked a great many questions on the floor. They will want to know how much more that is going to cost. We can say "that is the existing law. The only difference is we have changed one word in it." It will help us a great deal.

Mr. BROWN. The difficulty is that the members of the committee cannot remember every section, and just exactly what it is, and be absolutely certain when we are speaking on it.

Mr. SCOTT. Marginal annotations would be most helpful.

Mr. PRIEST. They would be more helpful than anything else, I think.

Mr. BROWN. They would not have to be printed. They could be typewritten and pasted on, or be written in pen and ink, or pencil.

Mr. PRIEST. Yes.

Mr. BULWINKLE. The committee will stand adjourned until 10 o'clock Tuesday morning.

(Thereupon, at 11:40 a. m., the committee adjourned to meet at 10 a. m., Tuesday, March 7, 1944.)





## PUBLIC HEALTH SERVICE CODE

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TUESDAY, MARCH 7, 1944

HOUSE OF REPRESENTATIVES,  
SUBCOMMITTEE OF THE COMMITTEE ON  
INTERSTATE AND FOREIGN COMMERCE,  
*Washington, D. C.*

The subcommittee met at 10 a. m., pursuant to adjournment, in the hearing room of the Committee on Banking and Currency, new House Office Building, Hon. Alfred L. Bulwinkle presiding.

Mr. BULWINKLE. The committee will come to order. You may proceed, Mr. Willcox.

**STATEMENT OF MR. ALANSON W. WILLCOX, ASSISTANT GENERAL COUNSEL, FEDERAL SECURITY AGENCY; AND LT. STANLEY L. DREXLER, UNITED STATES COAST GUARD—Resumed**

Mr. WILLCOX. Mr. Chairman, before turning to the subject of benefits, I think I should correct one omission in my statement last week in regard to section 210, relating to the appointment of commissioned personnel. It was an error of omission in that in that draft, which of course antedates Public Law 184, there is not included the last sentence in section 4 of Public Law 184, reading:

For the duration of the present war and for six months thereafter graduates of reputable osteopathic colleges shall be eligible for appointment as Reserve officers in the Public Health Service.

I do not believe that provision adds anything, as a matter of law, and whether it should or should not be included in this bill is of course entirely for the committee's discretion; that is, the persons mentioned in that bill are eligible for appointment under the general terms.

Mr. BULWINKLE. How about making it for all times?

Mr. WILLCOX. Well, I think it would have no substantive effect, whether it is included or excluded, or whatever the terms.

Turning then to the general subject of benefits, I propose to discuss the provisions that are contained in sections 212 and 213 of the bill, relating to retirement rights of commissioned personnel and to the payment of 6 months' salary upon death; that part of section 215 (a) relating to allowances for uniforms and increased allowances for foreign travel; section 605—I think I should also include section 506, relating to transportation of remains of deceased officers—section 605, relating to employees' compensation; section 606, having to do with per diem in lieu of subsistence; section 608, amending the Soldiers' and Sailors Civil Relief Act; and the whole group of laws made

applicable by section 8 of Public Law 184. The committee will recall that that law provides so-called full military benefits for certain groups of Public Health Service commissioned officers, and limited military benefits for those, in time of war, who do not receive full military benefits.

In keeping with the general purpose of codification, we believe that the bill should specify all of those benefits with some degree of particularity. Just how far it is desirable to write into this bill provisions from other statutes which are made applicable by Public Law 184, and how far we should rely on incorporation by reference, I am not clear. What I propose to do this morning is to outline the substantive rights which are involved, rather than to suggest a specific method of drafting.

These benefit provisions have been a subject of considerable discussion with the Bureau of the Budget. To some extent the question is interwoven with that concerning the use of the Reserve Corps in time of peace, since if Reserve officers were to be used in substantial numbers and for protracted periods it would seem reasonable to give them protection comparable to that of officers of the Regular corps.

The upshot of our discussions with the Bureau of the Budget, as set forth in the Bureau's letter which is in the record, is that we are recommending to this committee no substantive change of existing law. We are suggesting, that is, that existing rights be set forth in more explicit terms, but that no new rights be added. In some instances the scope of existing rights is in doubt, and in those cases I will undertake, to the best of my ability, to point out the ambiguities to the committee.

The first, and in some ways the most difficult, topic under this heading is that of retirement of officers of the commissioned corps. I think it will be more convenient to deal separately with the Regular corps and the Reserve Corps, although as the bill is drafted, you will note that retirement rights of both groups are dealt with in section 212.

Taking first, then, the retirement rights of the members of the Regular corps: For many years the regulations of the Public Health Service have provided for the placing of commissioned officers on so-called waiting orders when they are either disabled in line of duty or retired for age. When placed on waiting orders an officer receives 75 percent of the active pay which he was receiving immediately before he was placed on waiting orders—and by active pay I mean his base pay plus his longevity increase. There is one exception to this rule under existing regulations that I will come back to in a moment.

The statutory basis of these regulations seems to go back to the act of July 1, 1902—at least, that is the earliest statutory authorization we have found (42 U. S. C. 1)—which confirmed then existing regulations of the Marine Hospital Service. At any rate, I think there can be no question of the validity of the waiting-order provisions of the regulations. They have been recognized by the Comptroller General as valid.

Mr. PRIEST. Mr. Chairman, may I ask at that point, so far as the regular commissioned officers of the service are concerned, that retire-

ment provision is almost, if not entirely, identical with that of the Army and the Navy—75 percent of base pay plus longevity increase?

Mr. WILLCOX. That is right, sir: as the basic sentiment. The section that I am coming to in a few moments, I think, is not applicable to the Army. That is my understanding.

It will be noted that the bill makes retirement mandatory at the age of 64, and in that respect it differs somewhat from the Army practice, but it is in accord with the present regulations. There is no provision, as there is in the other services, for the recall to active duty of officers retired for age, and we are not asking the committee to make any such provisions. In making retirement compulsory even in time of war this may constitute a departure from the effect of Public Law 184.

The exception that I spoke of in regard to the method of computing retired pay applies to officers who were over 45 years of age at the time of their first appointment to the corps. In such cases, retirement either for disability or for age entitles the officer to 4 percent of his active pay at the time of retirement for each year of service, up to a maximum of 75 percent of the pay. (See 42 U. S. C. 66.) That is qualified under Public Law 184, in time of war, by an exception to that exception. An officer of the regular corps retired for disability incurred in line of duty in time of war is entitled to the full 75 percent of his pay regardless of the age at which he entered the service.

In the case of an officer retired for age in time of war, we are not clear just what the effect of Public Law 184 is. As I understand it, the Army does not, ordinarily at least, retire officers for age in time of war: certainly not by any automatic rule, at age 64, and we are doubtful whether retired pay upon retirement for age should be considered as a right which was conferred by Public Law 184. As this bill would depart from Army practice by continuing the automatic retirement at age 64 even in time of war, we suggest that the retired pay in such cases be the same as in time of peace, that is, 75 percent, unless the officer was over 45 at the time of appointment.

Mr. PRIEST. Now, may I ask a question there? Would that require an amendment? That is not provided for in the text of this bill?

Mr. WILLCOX. The text of this bill, sir, provides that restriction in case of all officers over 45 at the time of appointment. The text does not pick up the exception which was made by Public Law 184, that if retired for disability in line of duty they would get full pay, provided the retirement occurred in time of war.

Mr. PRIEST. Thank you, sir.

Mr. WILLCOX. There is also a question about the retirement rights under the present regulations of officers who have received temporary promotion. The committee will recall that the authority to make such temporary promotions in time of war is of recent origin.

It is my understanding that the other commissioned services, in the case of retirement for disability, grant retirement rights at the advanced grade. Under Public Law 184, at least in time of war, I think it clear that Public Health Service officers retired for disability would be entitled to the same treatment. The existing regulations provide that retirement for age shall be at the same rate as retirement for



disability, and we suggest that in all such cases the advanced grade should furnish the basis for determining the retired pay.

I may say that I believe it is an almost academic question, so far as retirement for age is concerned. By the time a man reaches 64, under the promotion policies of the Public Health Service, I believe it is true, is it not, Dr. Thompson, that by that age he would probably be a medical director anyway, so that there would not be a temporary promotion in effect at that time.

Dr. THOMPSON. That is right.

Mr. WILLCOX. I believe the only case that would be affected by that might be such officers as pharmacists, for instance, who are not subject to the normal promotional procedure.

Mr. BULWINKLE. All right, let me ask Dr. Thompson a question.

Dr. THOMPSON. how many officers have you retired on account of age, from the Public Health Service in the last year or two, each year since Pearl Harbor?

Dr. THOMPSON. I do not have the exact data, Mr. Bulwinkle. I do not think it is more than about 8 or 10 in one years. I am informed that it is 2 this year and 3 last.

Mr. BULWINKLE. Are those men physically qualified to perform their duties?

Dr. THOMPSON. Yes, sir; I think in most instances they were retired for age.

Mr. BULWINKLE. I am just talking about the age part of it.

Dr. THOMPSON. They were retired for age. I think in some instances the physical handicaps were there; but in other instances, the men were physically capable of continuing on in the Service.

Mr. BULWINKLE. Can you see any reason why in cases of emergency, where a man is physically and mentally qualified to perform his duties, why he should be retired?

Dr. THOMPSON. I prefer to have Dr. Parran answer that. I think it has been established, as the general policy, that it would be better to have the men go out rather than continue in Service after that period of time.

Mr. BULWINKLE. Under ordinary conditions, I agree with you; but under emergency conditions, I do not know whether I do or not. That is the reason I want you to make out your case.

Dr. THOMPSON. I think that is one point, Mr. Chairman, I would like to bring this point up, and that is that we have a limitation on the number of officers, so that by holding the officer in after he is 64 means that we are holding back the appointment of a younger and more active officer.

Mr. BULWINKLE. All right, sir. You still have not convinced me.

Dr. THOMPSON. Well, I think I would rather leave that question until Dr. Parran gets here.

Mr. BULWINKLE. All right. Go ahead, Mr. Willcox.

Mr. WILLCOX. The present regulations provide that officers placed on waiting orders by reason of disability may be recalled to active duty in the event they are found to have recovered. We suggest that a corresponding provision should be made in the bill.

Another slight exception to the 75 percent rule may be noted. If an officer who comes up for promotion fails by reason of physical disability incurred in line of duty, he may be retired at the grade to which



he would have been promoted. That is the present law and we suggest that it be continued in this bill.

We recommend, also, that provision be made for retirement at the advanced age of an officer who has held the position of Surgeon General or Deputy Surgeon General for 4 years or more. This would be in accord with Army practice.

I may say that if a man is Surgeon General or Deputy Surgeon General at the time he reaches retirement age, or at the time he incurs disability, he would, under the language of the bill, I think, automatically be retired at that advanced grade. The gage of the retired pay is the active pay that he was receiving immediately before his retirement. What we have in mind here is the case of a man who has held one of these advanced positions and then has dropped back in the Service. That would be a provision, in some sense, corollary to the suggestion made by Mr. Priest the other day, that some provision be made in regard to the status of such officers in the interim.

In order that the committee may have a complete picture of the retirement provisions, I should refer again to section 210 (c) (2). Section 210, you will recall, relates to promotion and separation of commissioned officers. It is provided that if an officer in the full or senior grade fails of promotion he shall be retired and paid at the rate of  $2\frac{1}{2}$  percent of his active pay for each full year of service, but not to exceed 60 percent. This provision is taken from 42 U. S. C. 37 (c) (3), the only change being the substitution of the word "retirement" for the words "waiting orders."

Section 9 of Public Law 184 brought all commissioned officers of the Public Health Service under the United States Employees' Compensation Act, with the qualification that those entitled to any other benefit on account of the same injury or death should elect which benefit they wished to receive. We recommend no change in this provision. I do feel, however, that I should call to the attention of the committee the somewhat anomalous result that officers of the regular corps may be more favorably treated in this respect than either commissioned officers in the other services or civilian employees of the Government. If a man is injured in line of duty he will normally elect to receive retired pay, which is more generous than disability benefits under the Employees' Compensation Act—that certainly is normally the case at least—if, on the other hand, he is killed as the result of injury in the course of his employment, his survivors can receive the benefits of the Employees' Compensation Act. In the other services, survivors would not ordinarily be entitled, in case of a death occurring in time of peace, to anything more than 6 months' pay.

I will come back to that in a moment.

Mr. BULWINKLE. Unless there is a bill introduced and referred to the Claims Committee of which we have had quite a number.

Mr. WILLCOX. You mean individual relief claims?

Mr. BULWINKLE. Individual cases.

Mr. WILLCOX. That might occur; and to some extent, the 6 months' pay provision, which I will come to in a moment, is an offsetting factor.

I am not suggesting any objections to the situation. I thought it merely should be called to the committee's attention.

Before leaving the subject of retirement, I should mention a provision of existing law which applies to those dentists, pharmacists, and

sanitary engineers who were brought into the commissioned corps under the Parker Act. In connection with section 210 (a), I explained that we had omitted in this bill the special provision for that group of officers insofar as it related to promotion, since to that extent it is already an executed provision. In the matter of retirement, however, the special provision now contained in 42 United States Code 66 should be added to the bill. This provides that active service in a civilian capacity in the Public Health Service should be counted in computing the retirement rights. This provision has no effect except for those officers who were over 45 years of age when they were commissioned, and it is limited to that small group who were taken in under the Parker Act and first became eligible by reason of that act.

The next subject I should like to take up is retirement of Reserve officers. Here we recommend considerable change in the bill.

I may say at the time this bill was drafted, there was some thinking in terms of a greater peacetime use of the Reserve Corps than is now contemplated. These changes are the result I think of that change in thought, and the changes we are suggesting are in accordance with the views that have been expressed by the Bureau of the Budget as incorporated in their letter which is now in the record.

The effect of Public Law 184 is to give reserve officers on active duty in time of war the same rights of retirement for disability as regular officers. This we recommend be continued.

We recommend, also, continuation of the coverage under the United States Employees' Compensation Act provided by section 9 of Public Law 184. Section 605 of the bill would accomplish this. The section may need some technical revision and probably it should be transposed to title II of the bill.

Here, again, I should call attention to the fact that in time of war those reserve officers may get greater rights than either military or civilian personnel; although for those entitled to veterans' benefits the option to claim under the Employees' Compensation Act adds relatively little to their substantive rights.

With respect to all retirements of reserve officers in time of peace, however, and to retirement for age even in time of war, it seems fairly clear that section 8 of Public Law 184 did not confer any new rights on reserve officers of the Public Health Service. In the matter of retirement for age, reserve officers have no military rights. In time of peace that is clearly true, and we think that Public Law 184 did not change it in time of war because the Army grants reserve officers no old-age retirement benefits.

In February of 1942 it was determined that reserve officers on active duty were covered by the civil-service retirement system.

Mr. BULWINKLE. Reserve officers of the Public Health Service?

Mr. WILLCOX. Yes, sir. Reserve officers on active duty were covered by the civil-service retirement system, and since that time they have been making the 5 percent contribution. While this conclusion represents a departure from Army practice, we should be glad to see coverage under the retirement system continued, and accordingly we recommend that explicit provision to that effect be included in the bill.

Mr. BULWINKLE. Have you got the amendments, as you go along on this?

Mr. WILLCOX. I am sorry, but I did not quite understand you, sir.

Mr. BULWINKLE. Have you provided the amendments? You recommend several changes in the bill. Have you drafted the amendments?

Mr. WILLCOX. No; we have not drafted those as yet, sir.

Mr. BULWINKLE. If you could do that, it would help us.

Mr. WILLCOX. We have some preliminary drafts on a good many of these points, Major Bulwinkle. There are basic questions, as I said at the outset, about how far you want to try to write the full text of the provisions into this bill, and how far it could be done by incorporation by reference. We do not want to expand this bill unduly in length, and I am inclined to think a good deal of it can be done by merely a reference to the other acts involved.

Mr. BULWINKLE. All right.

Mr. WILLCOX. The next item is the 6 months' pay on death of a commissioned officer, either of the regular corps or of the reserve, who dies while on active duty. This right was established by Public Law 184 for all commissioned officers in time of war, and in time of peace for officers in the regular corps detailed to the Army, Navy, or Coast Guard.

If an officer dies and his survivors are entitled to this payment and also to benefits under the Employees Compensation Act, his survivors must make an election. That is in accordance with the present law. Public Law 184 did not require an election, however, in the case of those officers who had died since Pearl Harbor but before the enactment of Public Law 184. Whether that difference was intentional, I am not entirely clear, but at any rate, we suggest that the requirement of an election be carried forward in the bill.

We recommend that section 213 be revised to conform with existing law.

Mr. PRIEST. May I ask one question there, Mr. Chairman?

Mr. BULWINKLE. Mr. Priest.

Mr. PRIEST. With reference to the provision for such survivors electing or choosing which settlement they will accept, is there a time limit when their choice is to be made in this law?

Mr. WILLCOX. There is not explicitly in the bill and that is one point on which I think section 605 of the bill is somewhat ambiguous and needs clarification. It is not entirely clear that an election may not be made one time and then reversed later. I think those points should be cleared in the draft.

I may point out that in time of peace, the regular corps, except officers who may die while detailed to the Army, Navy, or Coast Guard, would not receive this 6 months' benefit to which regular officers of the other services are entitled. To some extent this fact may offset the more favorable treatment which Public Health Service officers receive by being included under the United States Employees' Compensation Act.

That brings me to the group of benefits which rest entirely or chiefly on section 8 of Public Law 184.

That section, you will recall, provides so-called full military benefits on the basis of service in the Public Health Service on detail to the Army, Navy, or Coast Guard; service in the Public Health Service outside the United States in time of war; and any service in the Public Health Service in time of war while under an Executive order the Service is a part of the military forces. The same groups of Public



Health Service officers are made eligible under the National Service Life Insurance Act.

The effect of this provision, as I understand it, is to treat service of Public Health Service officers under these conditions as constituting military service for the purpose of the laws and regulations administered by the Veterans' Administration. These relate to compensation, pensions, hospitalization, domiciliary care, out-patient treatment, vocational rehabilitation, burial allowance, and a flag for the grave. The rights attaching to this group also include veterans preferences for civil-service purposes, and the benefits of the Veterans Employment Service, and the right to burial in a national cemetery even though death did not occur in line of duty.

The other benefits provided by section 8 of Public Law 184 are applicable to all commissioned officers on active duty in time of war, and to those detailed to the Army, Navy, or Coast Guard in time of peace. Those are the benefits described as "limited military benefits" in Public Law 184. Those include the exemption of pay up to \$1,500 from income tax and other exemptions under the Internal Revenue Code (26 U. S. C. 22 (b) (13), 421, 621; 50 U. S. C. App. 1013); the privilege of free mail (50 U. S. C. App. 639); reemployment rights (id., 357) for those called to active duty since November 11, 1943, the date of the enactment of Public Law 184; payment of accrued annual leave to any officers who have entered the service from civil-service positions since that date; replacement of property lost by military action or certain other hazards (31 U. S. C. 218); continuation of the pay and allowances of officers who are missing in action and authority to make a finding of death of officers who have been missing for more than 12 months (50 U. S. C. App., 1001 et seq.); authority to use a simplified form of affidavit in connection with increased allowances on account of dependents (Public Law 758, 77th Cong.); and exemption from the necessity of making the affidavit required of civil officers upon appointment, which is a prerequisite to receiving pay, and which is difficult for Public Health Service officers serving overseas to execute in case they receive a temporary promotion.

The Mustering-Out Pay Act is later than Public Law 184, and probably Public Health Service officers are not entitled to mustering-out pay. At any rate, the Bureau of the Budget has taken this position and we are not recommending that mustering-out pay be included.

The right of Public Health Service officers to wear military service ribbons and to receive military decorations is at the present time in a good deal of doubt. Probably those officers who have been detailed to the Army and have served in a particular theater of war are entitled to wear the ribbon representing service in that theater. Under other conditions, such as service overseas without detail to the armed forces, the right is less clear. We suggest that there be included in the bill an authorization to the President to make existing or special military ribbons and decorations available to Public Health Service officers.

The matter of burial expenses and allowances for officers who die in line of duty is a little complicated. Even before Public Law 184 there was provision in 42 U. S. C. 68 that the Public Health Service should bear the expense of preparing the bodies for shipment and transporting them to the former homes of the officers. This provision appears in section 506 of the bill, the only change being that instead of officers—a term which has been construed to include the higher



ranking civilian personnel as well as the commissioned officers—the bill refers to commissioned officers and personnel specified in regulations. We suggest that the authority should extend to shipment to the place of burial, if that differs from the former home of the officer. This change is prompted chiefly by the fact that certain officers have the right to be buried in a national cemetery, and the authority to pay the expense of shipment to the former home does not meet the situation. We also suggest that the cost of preparation “for burial” would be a better phrase than the preparation “for shipment” of the body.

Section 68 of title 42 of the United States Code did not include the cost of burial itself. By virtue of Public Law 184, I believe that this cost is also payable in the case of any officer who dies in service either in time of war or while detailed to the armed forces (10 U. S. C. 916 (b)). For the same officers, I believe that Public Law 184 also gave the right of burial in a national cemetery (24 U. S. C. 281) and the right to have a headstone provided at the expense of the Government (id., 279).

Public Law 184 specifically included allowances for uniforms as an item with respect to which Public Health Service officers in time of war were put on a parity with the officers of the Army and the Navy. At the time that bill was being drafted we believed that the effect of this provision would be prospective only, in the sense that it would grant such allowances only to officers called to active duty after the enactment of that law. Whether that view was called to this committee's attention, I do not know; but before the bill was approved by the President we did advise the Bureau of the Budget that that was our understanding.

We were rather embarrassed to discover later that apparently our understanding had been wrong. The Army, we find, provided a uniform allowance to all officers of certain grades who were on active duty on April 3, 1939, deducting any allowance which a particular officer had previously been paid (10 U. S. C. 904 (b)-(d)) Cf. 34 U. S. C. 760, providing uniform allowances for officers of the Naval Reserve. I am inclined to think that the legal effect of Public 184 was to entitle all officers of the corresponding grades in the Public Health Service who were on active duty on the date of enactment of Public 184, that is, last November, to the uniform allowance. In fact, there is some ground for arguing that they were already entitled to that before the enactment of Public Law 184, by reason of the general provision of preexisting law (42 U. S. C. 37) that they should receive the same pay and allowances as officers of the armed services.

We have discussed this situation with the Bureau of the Budget and expressed our willingness, which I should repeat here, to have this right limited in the fashion that we thought it was being limited when Public 184 was drafted. We have no intention of going back on any recommendations we made at that time. We do find ourselves in the position now, however, that apparently the rights which were granted are in excess of that, and apply to all those now on active duty. The Bureau of the Budget in its letter and in the informal discussions we have had with representatives of the Bureau did not take any explicit position in regard to this uniform allowance.

Under these circumstances, I do not feel that we should affirmatively recommend that this allowance be paid to officers who were called to duty before November 11, 1943. If your committee feels that it should

not impair existing rights, however, I believe that this end would be substantially achieved if the right were extended to those who were called to active duty since Pearl Harbor and were still on active duty on November 11, 1943.

Mr. SCOTT. That seems to be a fair proposition, does it not, in view of the fact that the practice has been for those who entered the Army and Navy medical service to receive a uniform allowance.

Mr. WILLCOX. That is true, sir.

Mr. SCOTT. I see no more reason why an officer in the Public Health Service should not receive it, in view of the fact that this emergency arose through no fault of his own and he had to be called in, and if he were called in prior to November 11, 1943, he would be out of pocket so much money.

Mr. WILLCOX. That is true, sir.

Mr. SCOTT. After that the Government paid it. That seems to be an arbitrary differentiation as between the two groups of people who ought to have equal treatment.

Mr. WILLCOX. Our embarrassment is our misunderstanding at the time of the enactment of Public 184.

Mr. SCOTT. I understand your embarrassment, but I do not think that officers of the Public Health Service ought to be penalized.

Mr. WILLCOX. I should have no hesitancy in agreeing if we had not recommended the more limited position, as we did last autumn.

The next item is allowance for travel of commissioned officers of the Public Health Service. In time of peace the officers of all the commissioned services receive a mileage allowance of 8 cents a mile for travel, except that for repeated travel between two or more places in the same vicinity they receive a per diem allowance in lieu of subsistence. In 1942 the Secretary of War (37 U. S. C., 112a) and in 1943 the Secretary of the Navy (37 U. S. C., 112) were authorized to prescribe travel allowances either on the mileage or per-diem basis without regard to whether the travel was "repeated travel." This discretion was extended to the Federal Security Administrator with regard to the Public Health Service by Public Law 184, and is also set forth in the bill as section 606 which appears on page 72. At the time when this section of the bill was drafted, proposed legislation was pending to fix the rate of the per diem allowance at \$8 and for that reason this figure was used in line 11. The proposed legislation failed of enactment and accordingly we recommend that the figure of \$8 be changed to \$7 which is the maximum rate prescribed for the other services. You will note that this section will be operative only during the present emergency and for 6 months thereafter. It probably should be restricted to the period of actual war.

Section 608 amends the Soldiers' and Sailors' Civil Relief Act to include commissioned officers of the Public Health Service, but only on condition that the Service is declared by the President to be military service. Under Public Law 184 these rights are available to Public Health Service officers in time of war regardless of such declaration by the President. We recommend that the bill be amended accordingly.

Finally, we come to the question of the status, for purposes of receiving the various benefits I have discussed, of Public Health Service officers detailed to other agencies of the Government, including the

Army, Navy, and Coast Guard to the States, and to outside institutions. The service of officers on all such details has always been regarded as service in the Public Health Service itself for purposes of longevity increase and future promotion in the Public Health Service.

Section 214 (d) of the bill so provides in case of details to the States and to outside institutions—and perhaps it should be expanded to include a reference to details to other Government departments also and a similar interpretation could probably be supported with regard to entitlement to the benefits provided by Public Law 184. At any rate, we suggest that an express provision be inserted making this the rule. This would not, of course, deny to officers detailed to the Army, Navy, or Coast Guard such benefits as, under Public Law 184, they derive from the fact of such detail.

That concludes what I had proposed to say on this general subject of benefits.

As I said, we have not undertaken the drafting of these provisions as yet. I had hoped that we could work with Mr. Perley on that at a later stage; but if you wish us to undertake that now, Mr. Chairman, we will give you such suggestions as we can.

MR. BULWINKLE. I would suggest that in order to save time, you would prepare them and have them in shape, and in all probability when we consider it in the subcommittee we will have them and then we will call Mr. Perley. He is busy now on some other matters and cannot be up here. That will save a lot of time as against floundering around in the subcommittee as the basis for what we want.

MR. WILLCOX. We will continue with the work on the tentative drafts we have made and submit them as soon as we can.

MR. BULWINKLE. Where did you leave off on the other; where did you leave off when we quit; on title 3, was it?

MR. SCOTT. Title III, page 21, was it not?

MR. WILLCOX. We finished, I think, the discussion on title II.

Turning to title III, Mr. Chairman, the first section of that title, section 301, is a composite drawn from a number of existing statutes relating to the general functions of the Public Health Service in terms of research and related activities. I think the most significant provisions of the present law conferring such authority on the Public Health Service are those I will mention in a moment.

I should like to consider rather carefully the text of this section, particularly of the language down through line 19, because it has been a matter of some discussion, and in certain respects it is a matter on which the Department of Labor has taken issue with the language we are proposing.

MR. BULWINKLE. I want to call to your attention that last year I received a letter from the commissioner of labor of North Carolina, and he was objecting to page 21, section 301, lines 15 and 16, the provision for "prevention of physical and mental diseases, defects and injuries of man, including environmental sanitation, industrial hygiene," and so on. The words "defects and injuries" he underscored. He says this to me, "This is simply meaning the health department would take over the program of accident prevention," and so on. I called his attention to the fact that that was already in the existing law; that there was no change from existing law. I have not heard from him after writing him.



Mr. WILLCOX. We certainly concur in that view, Mr. Chairman, that it does not involve a change of existing law. We are suggesting some modification of the language which might make it less objectionable to persons interested in the Labor Department functions.

The existing law includes section 7, 42 U. S. C., which I should like to read in full:

The Public Health Service may study and investigate the diseases of man and conditions influencing the propagation and spread thereof, including sanitation and sewage and the pollution either directly or indirectly of the navigable streams and lakes of the United States, and it may from time to time issue information in the form of publications for the use of the public.

Then in the venereal-disease statute, there is a provision appearing in section 25 of the United States Code, title 42, which includes among the duties of the Division of Venereal Diseases, as it was then created, the duty "to study and investigate the cause, treatment, and prevention of venereal diseases."

There is again in the National Cancer Institute Act a broad authority for conducting "researches, investigation, experiments, and studies relating to the cause, diagnosis, and treatment of cancer" (42 U. S. C. 137).

We have listed quite a number of sections of existing law as those from which the substance of section 301 has been drawn and I want to call attention to all of those that involve any substantive authority in this field.

Section 23 (b) of title 42 of the United States Code authorizes the acceptance of gifts "for study, investigation, and research in the fundamental problems of the diseases of man and matters pertaining thereto."

I believe those are the most important provisions of the statutes at the present time relating to the research functions of the Public Health Service. Other authority of the same sort is found in 42 U. S. C. 803 and 21 U. S. C. 196.

Further study and discussion since the drafting—

Mr. BULWINKLE. Well, this section 301 is nothing more nor less than a composite of existing law.

Mr. WILLCOX. That is right, sir. I believe that is entirely true.

Mr. BULWINKLE. And just covers the existing law.

Mr. WILLCOX. We do suggest that perhaps the word "impairments" might be substituted for the words "defects and injuries," so that it would read "physical and mental diseases and impairments of man," and we also suggest the deletion of the phrase "including environmental sanitation, industrial hygiene, water purification, sewage treatment, and pollution of lakes and streams."

Our thought, after considerable study and discussion, is that that whole clause really adds nothing to the generality of the language that precedes it and the very fact of its inclusion might cause some doubt on the generality of the language.

Mr. BROWN. "Control and prevention," would cover that?

Mr. WILLCOX. Yes.

Mr. PRIEST. "Causes, diagnosis, treatment, control, and prevention of physical and mental diseases, defects, and impairment of man"?

Mr. WILLCOX. We were going to drop the word "defects"—"physical and mental diseases and impairments of man."



Mr. SCOTT. "Defect" is a pretty broad word. One of the defects of man is his inability to avoid getting into wars.

Mr. WILLCOX. Yes.

Mr. SCOTT. I doubt that it is possible.

Mr. BULWINKLE. Injuries of man?

Mr. BROWN. I have had my feelings hurt once or twice since I have been in Congress.

Mr. BULWINKLE. No doubt more than that, but you are still here; you have survived.

Mr. PRIEST. It is your position, Mr. Willcox, about that, that by including certain of these phrases such as "environmental," and "sanitation," that there might be some question that it would exclude others?

Mr. WILLCOX. Yes, sir.

Mr. PRIEST. And restrict the general application to it?

Mr. WILLCOX. Yes, sir; that is exactly the point. I do not think we have any very strong views on that.

Mr. BULWINKLE. I was thinking that the word "impairment" is rather broad. Would it not be better to say "physical impairment"?

Mr. WILLCOX. It is preceded by the words "physical and mental."

Mr. BULWINKLE. "Mental" and "diseases"?

Mr. WILLCOX. "Physical and mental diseases."

Mr. BULWINKLE. All right.

Mr. SCOTT. You would put a comma before "impairment"?

Mr. PRIEST. Would you not remove the comma after "diseases"?

Mr. BROWN. "Diseases and impairment."

Mr. WILLCOX. "Diseases and impairments." We intended it without any comma. I had assumed that the words "physical and mental" would carry through and modify both—

Mr. PRIEST (interposing). Both "diseases" and "impairment" without the comma?

Mr. WILLCOX. Yes, sir. If the committee feels that the dropping of the "including" clause might cause any limitation on it there is an alternative suggestion that we could substitute for that "including" clause, the words "and matters pertaining thereto," which is taken from section 23 (b).

I think we should be quite content to simply omit the "including" clause.

Mr. BULWINKLE. Which is that now?

Mr. WILLCOX. Lines 16 to 18, beginning with the word "including" and running through to the end of that sentence.

Mr. PRIEST. It would seem to me that the law is just as good without it and might be a little better.

Mr. WILLCOX. That was very much our feeling, Mr. Priest.

After this bill was introduced, Mr. Chairman, the Labor Department raised with the Bureau of the Budget some questions that are involved in this section, and we have had some discussion with them informally, and the letter from the Bureau of the Budget, which is now in the record, states that—

In view of the expressed interest of the Department of Labor in the field of accident prevention, I am offering no objection to the filing by the Department of Labor of a report commenting on the implication of this wording in the bill.

I do not know of any such report having been received by the committee as yet, and I should prefer not to undertake to express to the committee the views of the Labor Department, of course.

Mr. BROWN. Let me ask you one question on that whole section: Does your Service expect to go further than to promote—and so forth—coordination, research, and investigation? Do you not expect to actually do something about it?

Mr. WILLCOX. In certain fields; yes, sir.

Mr. BROWN. This whole power that you have in this section is predicated only on doing certain things. You encourage, cooperate with, and render assistance to other appropriate public authorities, scientific institutions, and scientists, in doing what? First, in the conduct of or in promoting coordination of research, investigation, experimentation, and demonstration as studies. In other words, I think that section limits you.

Mr. WILLCOX. This is not intended, sir, as an exhaustive statement of the operating authority of the Public Health Service.

Mr. BROWN. On research and investigation?

Mr. WILLCOX. I should preface my remarks by saying that part A immediately under the title heading denotes the general division of the title.

Mr. BROWN. I did not catch the subhead. I saw only the general powers and duties of the Public Health Service.

Mr. WILLCOX. This does give the Service authority to conduct, if you will notice in line 9—

Mr. BROWN. Yes.

Mr. WILLCOX. As well as encourage and cooperate with.

Mr. BROWN. Conduct investigations and experimentations.

Mr. WILLCOX. Investigations and research.

Mr. BROWN. Somewhere else in the bill you provide the authority to do something besides conduct investigations?

Mr. WILLCOX. That is right.

Mr. BROWN. All right.

Mr. WILLCOX. Subsection (a), beginning on line 20, changes existing law only by adding the words "other appropriate means."

The thought is to authorize the use of moving pictures, for instance, in appropriate cases, as an informational medium.

Otherwise subsection (a) is in substance taken from section 7 of title 42 of the United States Code.

Subsection (b) is drawn from sections 8 (a) and 23 (e) of the code. It adds the words "appropriate public authorities." It applies to the facilities of the Service in general terms, whereas the provisions of section 23 (e) of the United States Code make specific reference to the facilities of the National Institute of Health.

Subsection (c) is drawn from sections 23c, 137a (e), and 137d (c) of the code and extends existing provisions with relation to fellowships which are applicable to the National Cancer Institute and the National Institute of Health. It so extends those provisions as to make them applicable to the Service generally.

Subsection (d) is drawn from section 137c (c) of the United States Code and again is extended from the present function of grants in relation to cancer so as to make it applicable to all of the research functions of the Service—all investigations that are dealt with in this section of the bill.

Subsection (e) is drawn from section 137a (b) and 137d (d) of the United States Code. Again it changes existing law in that it would no longer be limited to the field of cancer research.

Subsection (f) comes from section 13 of title 24 of the United States Code. It would change existing law in that it would omit a limitation to 10 cases in any one hospital at any one time, and it would also omit the reference to infectious or other diseases affecting the public health as a condition of admission.

Subsection (g) is drawn in part from section 137d (f) of title 42 of the United States Code, but again is extended to matters other than cancer.

Mr. BULWINKLE. That is what I wanted to ask you about. What is the use of having those parentheses in there?

Mr. WILLCOX. The two councils, the advisory councils, would be preserved by the bill, Mr. Chairman. One—

Mr. BULWINKLE. I do not like to draft a law and then stick parentheses in. I would rather redraft a section.

Mr. WILLCOX. We could easily make that revision, Mr. Chairman.

Mr. BULWINKLE. We are writing a permanent law now, and parentheses are nearly as bad as this "and/or" proposition.

Mr. WILLCOX. I thought you had reference to the substance. The form of it could very easily be changed.

Mr. PRIEST. I do not think that you need the parentheses. I think you could leave the parentheses out, insert a comma after "council", and let it read as straight language.

Mr. WILLCOX. I think that would do it.

Mr. PRIEST. That, it appears to me, would settle the whole matter.

Mr. WILLCOX. Section 302, relating to narcotics, is taken with only very slight changes from section 196 of title 21 of the United States Code.

Mr. BULWINKLE. There are not any important changes in that, are there?

Mr. WILLCOX. There are no substantial changes at all.

Mr. BULWINKLE. Let us just pass on with it, briefly, because Dr. Par-ran explained it to us, anyhow.

Mr. WILLCOX. Then we come to part B of this title, relating to Federal-State cooperation.

The first section of that, section 311, is drawn from sections 92, 92a, and 803 of title 42 of the United States Code.

Mr. BULWINKLE. There is no change in existing law?

Mr. WILLCOX. Slight changes, Mr. Chairman.

Mr. BULWINKLE. All right; go ahead.

Mr. WILLCOX. The provision that the Surgeon General may accept from local authorities assistance in the enforcement of quarantine regulations, I believe, has not been spelled out in explicit terms in existing law. The present provision authorizes the Public Health Service to cooperate with the State and local authorities, but it does not, in terms, authorize them to accept assistance from the local authorities.

The provision beginning in line 4, on page 24, is also somewhat broader, I think, than existing law. It reads:

The Surgeon General shall also assist States and their political subdivisions in the prevention and suppression of communicable diseases.



Under the present law such assistance can be rendered in the form of detailing personnel and, of course, under the broad provisions, in case of threatened or actual epidemics.

Mr. PRIEST. In what way does this broaden or expand that authority for assistance?

Mr. WILLCOX. I am not sure whether it expands the actual authority or whether it expands the way it is stated. I do not know whether there are procedures for assisting States that might be used that are not encompassed in the present law.

Mr. BULWINKLE. You are doing all of that now, Dr. Parran?

Dr. PARRAN. We are, Mr. Chairman.

I do not interpret the language of section 311, beginning in line 4, on page 24, as broadening our existing authority, but merely stating the same authority in somewhat different language.

Mr. PRIEST. May I ask one other question there? Is that authority, in your opinion—I am asking Dr. Parran—is that authority adequate? I am not thinking about restricting it. If it is not adequate, I would favor broadening it, in other words, and I am just wondering if it is adequate in existing law in your opinion?

Dr. PARRAN. In my opinion, it is at present, especially if it is read in connection with other sections of the act.

Mr. PRIEST. Thank you, sir.

Mr. WILLCOX. Section 312 of the bill relating to health conferences involves no change of law from 42 U. S. C., section 29—

Mr. BULWINKLE. Suppose, in order to save time, Mr. Willcox, unless the committee asks particularly where it comes from, that you go on and just state whether it is a departure from existing law and then when you revise your statement, you can put it in there, so that we can see it then, because we are not taking notes of it, and unless somebody asks you for it, particularly, I think you should proceed that way.

Mr. SCOTT. Just insert it for the purpose of the record later and save time, save our time and your time.

Mr. PRIEST. I think, that Mr. Reece made the request of Mr. Willcox or somebody that they state the changes in each case, but it is very proper to do it that way, in order to expedite the matter.

Mr. BROWN. Yes; because we will not be able to follow it here.

Mr. SCOTT. I think that it actually interferes with an understanding of what is going on, having too many sections in your mind.

Mr. WILLCOX. Section 313, relating to the collection of vital statistics, involves no change (42 U. S. C. 30).

Mr. BROWN. What does that word "morbidity" mean?

Mr. SCOTT. I am glad you asked that question.

Dr. PARRAN. Sickness or illness.

Mr. BROWN. Well, a morbid person is not a sick person, is he?

Dr. PARRAN. Yes, sir. They use the term "morbidity."

Mr. BROWN. Not in the ordinary use of the word; it must be a medical use.

Dr. PARRAN. It is in medical use. We use such words as "mortality," and "morbidity," to mean a morbid situation.

Mr. BROWN. I understand it in that sense. I understand then it is used in a medical sense, and not used in a normal way.

Dr. PARRAN. It is used in a normal technical way, but not in a normal way.



Mr. BROWN. Just ordinary country newspaper style is what I am talking about.

Dr. PARRAN. We should be equally agreeable——

Mr. BROWN. No; it is all right, if that has the meaning that you intend, in the medical sense; that is all right.

Mr. BULWINKLE. Morbidity would take in more than a physical condition.

Mr. BROWN. Yes.

Mr. BULWINKLE. It would take in a mental trouble.

Mr. BROWN. A morbid person, as we use it in a newspaper sense, would mean a person who was disconsolate, or depressed, or something of that sort.

Dr. PARRAN. As I have indicated, it has somewhat of a different meaning, but a rather exact meaning in terms of biostatistics, vital statistics.

Mr. BROWN. It has a distinct understanding in medical phraseology?

Dr. PARRAN. It does.

Mr. WILLCOX. The next section, 314, relates to grants and services to States: This section has been the subject of discussion and comment by the Bureau of the Budget, and here I think I should refer to the provision of existing law, because there is some change, and there are changes we wish to recommend now in the text of 314.

The first, subsection (a) picks up the authority to make grants to States for venereal-disease control (42 U. S. C. 25 (a) (e)). It also includes provision for the conduct of health and sanitation activities by the Public Health Service in certain military areas, which we suggest be taken out of the text of this subject.

Mr. BULWINKLE. That is on page 26?

Mr. WILLCOX. Page 25, Mr. Chairman, is the provision in regard to venereal-disease control, which is again included on page 26 in connection with the general grant for public-health work.

Mr. BULWINKLE. What is it you are taking out?

Mr. WILLCOX. Taking out of the text of both 314 (a) and 314 (b), and inserting as another section under more limited provision, the authority beginning on page 25, line 17, with the (2) running down to line 22, to the semicolon, and correspondingly on page 26, line 13, beginning with the (2) and running down to line 19, the semicolon. Those provisions are taken from the emergency health and sanitation item of the current appropriation act.

There is no basic law authorizing such direct activities by the Public Health Service. We thought when we put it in here that there should be provision in the basic law and I do not think the Bureau of the Budget has any disagreement with that view.

We thought also that these activities would automatically wane and disappear after the war, because they are for health and sanitation activities in areas joining military and naval reservations, for instance, and in and adjacent to defense plants, so that we thought the provisions were self-eliminating with the demobilization period.

We do feel that they should not be strictly confined to the war period, because it may be necessary to continue some of them during the period of demobilization.

The suggestion made by the Budget Bureau after our discussion, and one which is entirely acceptable to us, is that those provisions be removed from sections 314 (a) and 314 (b), and that another section be

inserted which would constitute the basic law authorizing the activities that are now authorized under the appropriation acts, limited in terms of the war period and whatever phrase the committee might think appropriate to cover the period of demobilization following the war; but that it not be made permanent law.

Mr. BULWINKLE. (c) was not changed?

Mr. WILLCOX. Subsection (c)?

Mr. BULWINKLE. Yes.

Mr. WILLCOX. Yes; subsection (c) represents a change and I think I should make one other remark, if I might, about subsection (b), Mr. Chairman.

Mr. BULWINKLE. All right.

Mr. WILLCOX. The Budget Bureau asks that there be restored a limitation on the authorized appropriation. You will recall that the present title VI of the Social Security Act has an authorization limitation of \$11,000,000. They do not say that it should necessarily be limited to \$11,000,000, but they do object to the open-end authorization which is contained in the last three lines on page 26.

I may say that this section picks up not only the title VI authorization which is now \$11,000,000; it also includes the provision "prevent and control the spread of communicable diseases in interstate traffic" for which a different appropriation has been made. As written here it includes this emergency health and sanitation item which we are suggesting be taken out of this subsection; it includes the cost of pay and allowances of personnel detailed to the States.

Mr. BULWINKLE. That would be all right, to take it all out? I can see why the Budget Bureau would object. On the other hand, I do not think this practice which Dr. Parran stated the other day as existing is proper; that is, here we have on this venereal disease control work a certain amount of money appropriated under that, and then we come under another act and put something else in, and we take an appropriation for that. Personally, if we are going to have to spend it, I think it ought to be shown in the original act and that you ought not to go around to other provisions of the law somewhere to get it.

Mr. WILLCOX. There is no limitation, Mr. Chairman, on the present authorization for the venereal-disease appropriation and the Budget Bureau acquiesces in the continuance of that. We are, therefore, not suggesting that any limitation be written in to subsection (a). On the other hand, there is a limitation of \$11,000,000 in the present title VI, applicable to grants for general purposes, and they suggest—

Mr. BULWINKLE. All right, suppose we have a spread of malaria after this war is over and you have those limitations in there. I do not care which administration is in power, they are going to find the money under something else for them to go in and do the work.

Mr. PRIEST. And they should.

Mr. BULWINKLE. And should do it.

What do you think about it, Dr. Parran?

Dr. PARRAN. Mr. Chairman, I necessarily subscribe to the opinion expressed by the Bureau of the Budget.

Mr. BULWINKLE. I know; but I will get at it this way. Is \$11,000,000 sufficient?

Dr. PARRAN. It is not.

Mr. BULWINKLE. All right. Why is it not?

Dr. PARRAN. Because the language of section 314 (b) includes authority at present held by the Public Health Service under other provisions of the law. In addition to including the authority now held under title VI of the Social Security Act, specifically, this subsection (b) of section 314, beginning in line 12, authorizes the Public Health Service to "prevent and control the spread of communicable diseases in interstate traffic," which authority is contained in basic law, not limited by the \$11,000,000 in title VI.

Also under (3) in line 19, there is a provision for meeting the cost of pay and allowances and traveling expenses of commissioned officers and other personnel of the Service detailed to assist States. That would represent a considerable item paid for outside of the \$11,000,000 limitation.

And finally in line 22, there is authority for "administration of this section" which amount is carried in still other currently authorized appropriations.

In addition to the broadening of authority, as I tried to indicate in my earlier testimony, the developments in scientific knowledge do make it desirable for the Public Health Service to expand its co-operation and area of assistance to the States.

Malaria has been cited as an example, and tuberculosis has been cited as another example, bearing on this point of view.

Mr. BULWINKLE. As Mr. Scott so well said just now, the Appropriations Committees in both the House and the Senate are also limiting factors in any appropriations you seek.

I want to get away from this thing of transferring funds around from one thing to something else. I believe in letting you know what you are doing in one thing, so that when a man goes to it he can find out.

Mr. PRIEST. May I ask a question, Mr. Chairman?

Mr. BULWINKLE. Mr. Priest.

Mr. PRIEST. Mr. Willcox, did the Bureau of the Budget recommend that the authorizations in lines 23, 24, and 25 be stricken entirely from the bill and not recommend any language in lieu thereof?

Mr. WILLCOX. They did not make the recommendation in terms of specific language, Mr. Priest. They recommended that a numerical limit be inserted in lieu of the general language. They did not recommend that the present figure of \$11,000,000 in title VI be inserted. They, of course, recognize, as Dr. Parran pointed out, that that includes other items as well as the item for which there is now an \$11,000,000 appropriation.

Mr. BULWINKLE. The trouble is that you run into just what has been done in the past on account of public health. You have so many appropriations, so much legislation put on appropriation bills to meet different things. Go ahead.

Mr. WILLCOX. Subsection (c) makes two changes, both of which I believe were referred to by Dr. Parran in his testimony on the opening day. (See 42 U. S. C. 25 (b), 802 (a), 802 (b).) The effect of those is to make the grant procedure more flexible than it is under the present law.

The same is true of subsection (d) (see 42 U. S. C. 25 (c), 802 (c)). The determination would be made from time to time instead of at rigidly fixed periods.



My attention is called to one other provision of subsection (c), if I may revert to that for a moment, which is taken from the present venereal disease grant statute and which by the text as presented here would become applicable to both these grants-in-aid programs, to which the Bureau of the Budget has objected, insofar as it relates to the title VI grants. That is a provision authorizing the Surgeon General to divide the money appropriated between the grant program and the Federal administrative end of the thing. That authority does exist as I say, in the present Venereal Disease Act, but the Bureau of the Budget objected to its enlargement, to make it applicable to title VI of the Social Security Act.

Mr. PRIEST. Mr. Chairman, I think that perhaps for the sake of the record at this point, while considering subsection (c), or paragraph (c), that we might recall that Dr. Riley who spoke on it for the State commissioners of health, stated that this formula for making these allotments was entirely satisfactory to the State health authorities.

Mr. WILLCOX. Thank you, Mr. Priest. That is an appropriate comment.

Subsection (e) involves no change of existing law (42 U. S. C. 25 (c), 802 (d)). Subsection (f) incorporates in the statute what has been carried in regulations, as I understand it, ever since title VI was enacted, requiring State matching of money granted under title VI. Much the same can be said of subsection (g). It is not—

Mr. BULWINKLE. Just a minute, before you get off of that. In line 8 there—I do not remember that we have had the effect of that language described. That is line 8, page 28, in connection with the general purposes of the fund to each State and subdivision. They do not pay you back, do they?

Dr. PARRAN. They do not; neither do the States, nor the political subdivisions pay us back. Each, however, does make an appropriation for the conduct, let us say, of the local health department. The fund may be made up, 20 percent Federal, and another 20 percent State, and the other remaining 60 percent from local appropriations. We have always encouraged the appropriation of added local funds for the same purpose for which our funds are expended.

Mr. BROWN. In some instances, Doctor, you will have a city, a school district, and a county, and a State, all cooperating along with the Federal Government.

Dr. PARRAN. That is correct, in one joint purpose.

Mr. BULWINKLE. But, does your political subdivision then, if it is matching it, does it not take that into consideration with the State; the State takes it up with you? You do not go down to the local county and see about it?

Dr. PARRAN. Only at the request of the State and in conjunction with the State.

Mr. SCOTT. What I was thinking about was that perhaps in some States, perhaps the school district, maybe in some States the town will have the power of expenditure of funds authorized in some general law. There you are dealing with the political subdivision of a State which is neither a county nor a State.

Dr. PARRAN. That is true, and in such an example, Mr. Scott, the local school authority would present a cooperative budget, perhaps



with the local county or State authorities, under which the schools, let us say, would be paying for one or more school nurses or school dentists, who would work as a part of the larger team in the county, whether or not employed by the school or directly under the administration and control of the county health officer.

Mr. WILLCOX. And you want to continue the law so that such local funds can be counted as constituting a part of the State's matching funds, is that it?

Dr. PARRAN. That is true.

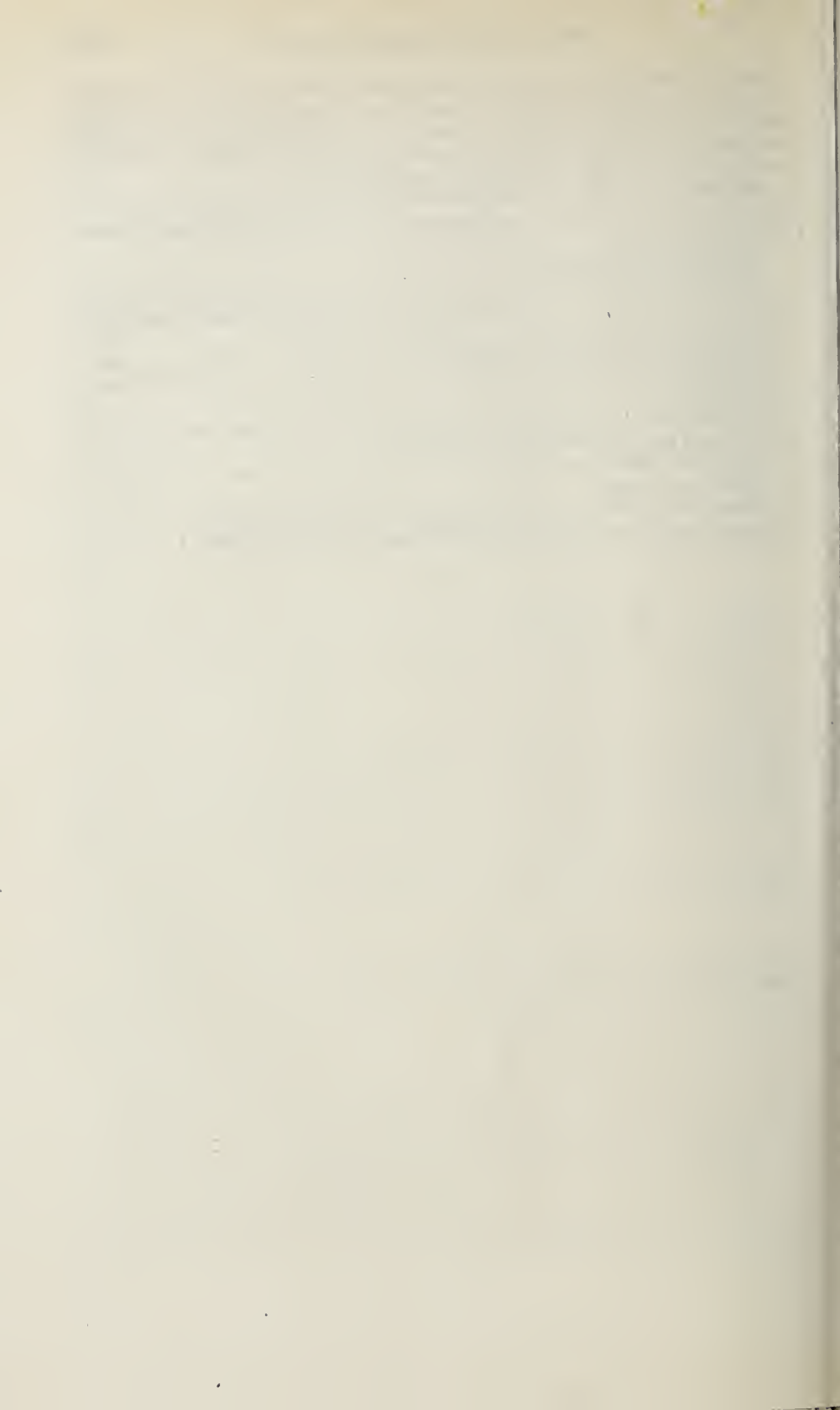
Mr. BULWINKLE. There is one thing I do agree with Mr. Scott on. I think the word "its legal subdivision" would be better than "political subdivision."

Dr. PARRAN. We have no objection to that term. This is a term which is used in the Social Security Act and in the Venereal Disease Control Act.

Mr. BULWINKLE. I hate to have to quit, but it is a quarter of 12, and we will have to get over on the floor.

Therefore, the committee will stand adjourned until 10 o'clock tomorrow morning.

(Whereupon, at 11:45 a. m., the committee adjourned to meet at 10 a. m. the following morning, Wednesday, March 8, 1944.)



# PUBLIC HEALTH SERVICE CODE

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WEDNESDAY, MARCH 8, 1944

HOUSE OF REPRESENTATIVES,  
SUBCOMMITTEE OF THE COMMITTEE ON  
INTERSTATE AND FOREIGN COMMERCE,  
*Washington, D. C.*

The subcommittee met at 10 a. m., pursuant to adjournment, in room 1310, New House Office Building, Hon. Alfred L. Bulwinkle, presiding.

Mr. BULWINKLE. The committee will come to order. You may proceed, Mr. Willcox.

STATEMENT OF MR. ALANSON W. WILLCOX, ASSISTANT GENERAL COUNSEL, FEDERAL SECURITY AGENCY; AND LT. STANLEY L. DREXLER, UNITED STATES COAST GUARD—Resumed

Mr. WILLCOX. Mr. Chairman, would it be satisfactory at this point to ask Dr. Parran if there is anything he wants to add about the question of mandatory retirement of Public Health Service officers of the Regular Corps at age 64, in time of war, which was referred to yesterday? You will recall that he was not in the room at the time that question came up.

Mr. BULWINKLE. I would suggest that we leave that until afterward. The doctor will probably have to go on again.

Mr. WILLCOX. All right, sir.

Mr. BULWINKLE. And there will be some other things that probably you do not clear up.

Mr. WILLCOX. We had considered yesterday section 314, as far as subsection (f). I should like, however, if I may, to revert to subsection (b) for a moment, because there is one comment of the Bureau of the Budget on that section which I did not call explicitly to the committee's attention. The Budget Bureau recommends that the authorization of appropriations for administration and for interstate quarantine activities be removed from this section and inserted elsewhere in the bill. It is apparently the view of the Budget Bureau that appropriations for these purposes—that is, for administration and for interstate quarantine activities—should be made as a separate item from the appropriation for grants to the States.

Before leaving this subsection I wish to make sure that the position of the Federal Security Agency in regard to it is clear. We originally recommended the open-ended authorization which appears in the bill, and the very considerable flexibility in the use of funds, because our experience under the Venereal Disease Control Act (42 U. S. C.

25a-25e), on which these provisions were patterned, has been quite satisfactory. In view of the position which the Bureau of the Budget has taken, we are making the following revisions in that recommendation:

We now suggest that the items numbered (1) and (2), relating respectively to interstate quarantine activities and emergency health and sanitation activities, and also the item for the administration of the grants, be removed from this subsection and incorporated elsewhere in the bill. We also suggest that a limit be imposed upon the authorized appropriation under this subsection, though we do not believe that it should be restricted to the present \$11,000,000 authorization in title VI of the Social Security Act (42 U. S. C. 801-803), especially since there would still be included in the subsection activities for which appropriations are now made separately from the grants and outside the \$11,000,000 limit. Finally, we also suggest, as recommended by the Bureau of the Budget, that there be imposed a limit upon the amount of the appropriation which should be available for the detailing of Public Health Service personnel to the States in lieu of cash grants.

I might amplify that by saying that the Bureau of the Budget did not object to the inclusion in the same authorization of the provision which now appears in a different section of title VI (42 U. S. C. 803) for the detailing of Public Health personnel to the States. They do recommend, however, that that authority be subjected to a separate limitation within the overall limitation in that appropriation.

If these limits are made adequate we believe that they will not hamper proper operations of the program in question.

Subsections (f) and (g) of section 314 do not appear in the statutes, but are taken from regulations which have been prescribed both under title VI of the Social Security Act and the Venereal Disease Control Act of 1938 with the concurrence of the State health officers.

Subsection (g) is more explicit than the regulations in providing for administrative hearing as a prerequisite to withholding funds from any State, and also in authorizing the withholding of a part of the grant in lieu of withholding the whole of it.

Subsection (h) is the same as the provision of present law (42 U. S. C. 25d) applicable to the venereal-disease grants. The corresponding provision in title VI of the Social Security Act (42 U. S. C. 802c) is less explicit in requiring consultation with the State health authorities, but I believe that it has been the practice of the Public Health Service to consult with them as fully concerning regulations under title VI as concerning those relating to venereal disease.

Dr. Riley suggested last week the insertion of the words, "and agreement." Dr. Parran accepted this suggestion in substance, but we think some cautionary words should be added, such as "so far as practicable." Like Dr. Riley, we are thinking in terms of what might happen at some future time, and it is possible to imagine that the State health officers might disagree among themselves.

Mr. BULWINKLE. Now, coming back to subsection (h) page 29, line 7, "after consultation and agreement," do you agree with that?

Mr. PRIEST. I suggest here a little more cautionary language in that.

Mr. WILLCOX. We were a little troubled by that suggestion, Major Bulwinkle, not in the substance so much as really in the wording of it.



We are thinking in terms of what might happen at some future time, just as Dr. Riley was, and it occurred to us that there might be a situation at some time in which the 48 State health authorities would not all be in agreement.

Mr. BULWINKLE. I have got that coming up, too.

Mr. PRIEST. Mr. Chairman, I am scheduled as a witness myself before the Judiciary Committee on one of my own resolutions, at 10:30. I hate to be absent from this hearing, because I am enjoying it a great deal, but if you will excuse me, I am going to have to go over there for a little while and appear as a witness, and I will get back as soon as I can.

Mr. BULWINKLE. With the promise that you will read this.

Mr. PRIEST. I will read this and read it carefully and check all references; yes, sir. That is a promise which is given unconditionally.

Mr. BULWINKLE. All right, sir, you may proceed.

Mr. WILLCOX. In such a case, that is, possible disagreement among the State health officers, a prohibition against issuing regulations without the agreement of the State health authorities could result in a total impasse. Then, too, I would raise the question whether your committee would wish to confer upon State officers an actual veto power over Federal regulations.

Our suggestion is that some such wording be added as "so far as practicable."

I may say that I mentioned these points briefly to Dr. Riley after his testimony, and while he could not speak for his association or the executive committee, he did indicate that he did not expect any trouble in agreeing on language to meet our objections.

Mr. BULWINKLE. Well, you are going to possibly have trouble, if you do. It is going to be pretty hard to agreed to it. I can see that the point that you raise is correct, but you probably will have to put in or add another section, or another proviso, or put a proviso on. There is more than just saying "wherever practicable." It will lead you into all kinds of difficulties.

That is a matter to be worked out later on.

Mr. WILLCOX. Yes, sir.

Subsection (i) will need revision if your committee accept the recommendations of the Bureau of the Budget concerning subsection (b).

Section 315 deals with matters covered by two provisions of existing law (42 U. S. C. 7, 93) omitting a great deal of detail that seems unnecessary. I should perhaps call attention to the addition of the words "or otherwise" in line 20, which are consistent with the authority in section 301 (a) of the bill to make the results of research available through publications and other appropriate means.

One of the items omitted which imposes a duty on certain consular officers to make weekly sanitary reports, is picked up in section 365 (a).

Part C of title III relates generally to the functions of the Public Health Service in the operation of hospitals, the conduct of medical examinations, and the furnishing of medical care to Public Health Service beneficiaries.

Section 321 (a) is new statutory language, but expresses merely what is implicit in existing law, including the annual appropriation acts. You will note that the subsection expressly authorizes the furnishing of prosthetic and orthopedic devices, an authority which we

believe the Public Health Service now has in cases where it is necessary, but which is not explicitly provided by law.

Subsection (b) is based on existing regulations, and subsection (c) is adapted from the act relating to the care of narcotic addicts (21 U. S. C. 229), and expanded to apply to all Public Health Service hospitals. Subsection (d) would provide an express statutory basis for regulations of long standing.

The next section, 322, defines the classes of persons entitled to free medical and hospital services at hospitals and stations of the Service.

The first five paragraphs rest either on express provisions of present statutory law (42 U. S. C. 6, 6a; 24 U. S. C. 10; Public Law 17, 78th Cong.) or upon regulations of long standing which have interpreted more general provisions. I believe I can assure the committee that these five paragraphs involve no change of existing law.

Paragraph 6 would be new matter. The persons referred to in this paragraph are presently receiving medical care as a reimbursable transaction under the Economy Act. We know of no substantive reason why payments should be made to the Public Health Service for treatment of this group any more than for those listed in the first five paragraphs. The language in this paragraph was suggested to us by the War Shipping Administration.

Paragraph 7, as written, would make a departure from existing law (42 U. S. C. 42, 94d; 24 U. S. C. 9) which the Bureau of the Budget has disapproved. At the present time Public Health Service noncommissioned personnel in the field are entitled to hospital relief in case of a sickness or injury occurring in line of duty. There is no corresponding provision for the noncommissioned departmental personnel. The National Institute of Health is declared by statute (42 U. S. C. 9a) to be a part of the field service. Now that the Public Health headquarters have been moved to Bethesda, the discrimination between the departmental and field personnel has become more conspicuous.

While the bill would have removed this discrimination by making all personnel of the Service eligible, we recognize that as long as civilian personnel of the Government generally are not entitled to similar benefits, it would create a new discrimination.

In view of the position taken by the Bureau of the Budget, we recommend that this paragraph be amended to apply only to the field personnel, including the National Institute of Health.

Subsection (b) combines two provisions of existing law (24 U. S. C. 11, 11a) and amplifies them slightly in accordance with existing regulations and practice.

In subsection (c), I believe that reference to seamen on foreign-flag vessels should be deleted, since this group is covered by subsection (b). The remainder of subsection (c) is taken from existing law authorizing the Public Health Service to examine arriving aliens (8 U. S. C. 152), and from the appropriation acts which seem to authorize the rendition of medical and hospital services to persons detained under the immigration laws.

Mr. BULWINKLE. You are speaking of subsection (c). That is the subsection that you said should be deleted, just a minute ago.

Mr. WILLCOX. I did not suggest the deletion of the whole subsection, Mr. Chairman, but of the—

Mr. BULWINKLE (interposing). Well, I want to know which words you suggest deleting.

Mr. WILLCOX. I suggested the deletion from subsection (c) of the words "seamen on foreign-flag vessels."

Mr. BULWINKLE. In line 20.

Mr. WILLCOX. In line 20; yes, sir.

Mr. BULWINKLE. Page 32.

Mr. WILLCOX. Yes, sir. That is really a repetition of what is already in subsection (b).

Subsection (d) is taken from regulations. I believe that Dr. Par-  
ran mentioned this proposed addition of express statutory authority  
to afford temporary treatment in case of emergency.

Paragraph (e) is also taken from regulations, the validity of which  
has been recognized by the General Accounting Office.

Section 323 authorizes the Service to render those services in Fed-  
eral prisons which it is required by the Criminal Code to do.

Section 324, again, would provide express authority to the Public  
Health Service to perform certain functions which are required by  
other statutes to be furnished by the United States or by medical  
officers of the United States. (See, e. g., 5 U. S. C. 710, 759.)

Subsection (b) inadvertently omits applicants for Federal employ-  
ment, who constitute a large group of persons now given medical  
examinations by the Public Health Service. We recommend that  
the language be revised to include this group.

Section 325 picks up a further provision of existing law (8 U. S. C.  
152) in regard to examination of aliens arriving in this country.

Section 326 (a) combines the several provisions of existing law  
(24 U. S. C. 8, 33 U. S. C. 869, 42 U. S. C. 42) providing for the treat-  
ment of commissioned officers and enlisted personnel of the Coast  
Guard, and the Coast and Geodetic Survey, and commissioned officers  
of the Public Health Service.

Mr. BULWINKLE. Have you had an opportunity to take this up  
with the Coast Guard or the Coast and Geodetic Survey?

Mr. WILLCOX. We have had some discussion with the Coast Guard,  
but not as yet, I think, with the Coast and Geodetic Survey. This  
does not change existing law in those respects. There is one sug-  
gestion that we expect the Coast Guard to make in regard to this  
provision or to a later subsection of this same section.

Dr. THOMPSON. May I correct that statement, Mr. Willcox. The  
Coast and Geodetic Survey did submit a letter in which they made  
just a few suggestions to include all their personnel, what it should  
be, so we do know what the Coast and Geodetic Survey think of this  
provision.

Mr. WILLCOX. Thank you, Dr. Thompson. I was not aware of  
that.

Section 326 (b) combines the existing provisions of law for the  
medical and hospital treatment of dependents of commissioned officers  
and enlisted personnel of the Coast Guard and the Coast and Geo-  
detic Survey (24 U. S. C. 8, 33 U. S. C. 869). This is not free service  
and can only be given to the extent that facilities are available. This  
subsection in its application to dependents of commissioned officers of  
the Service is new. At the present time Public Health Service depend-  
ents are given out-patient treatment and medical supplies without  
cost, but except for dependents of officers on duty at hospitals and  
quarantine stations, are not entitled to hospitalization even on a pay  
basis at Service hospitals.



Subsection (c) combines several provisions of existing law with new statutory authorization for the existing practice with regard to examination of Coast Guard personnel (14 U. S. C. 170, 42 U. S. C. 17c). We recommend the insertion in this subsection of language authorizing the detail of commissioned officers aboard vessels of the Coast Guard and Coast and Geodetic Survey. These details are specially authorized by existing law (14 U. S. C. 59; 42 U. S. C. 17c). While probably they would be authorized under section 214 (a) it is believed preferable to follow existing law in treating them specially.

I may say that is another point which I expect the Coast Guard to raise and which is entirely satisfactory to us.

Part D, relating to lepers, is taken from existing law (42 U. S. C. 122, 133, 134). The only change of any consequence is that section 331 would authorize the receipt and treatment of lepers at any hospital of the Service suitable for the purpose, whereas existing law refers specifically to the Carville Leprosarium and the Leper Reservation in Hawaii.

Part E, also, is taken from existing law (21 U. S. C. 222, 226, 227, 229, 230-7). Here again the principal change is to generalize provisions now applicable to two specified institutions. Minor changes would include the vesting in the Surgeon General, instead of the Federal Security Administrator, the authority under section 342 to establish shops in narcotic hospitals; making the funds of such shops available for the purchase of uniforms; and the addition of authority to sell the products of such shops.

Mr. BULWINKLE. What do you mean by "shops?"

Mr. WILLCOX. Under present law work shops are established by the Public Health Service in these hospitals. I take it this is done as a matter of therapy, is it not, Dr. Parran?

Dr. PARRAN. It is and should be made clear that these shops are now authorized in the narcotics hospitals and are used as a part of the rehabilitation treatment of the narcotics addicts. They make clothes; they make articles for sale to other Government departments and institutions. That authority now exists, but I believe the wording refers to the Secretary of the Treasury and now it would be the Federal Security Administrator.

Mr. WILLCOX. We were not quite clear whether the reference should be to the Administrator or to the Secretary in line 23, on page 37. That has to do with the purchases by the Government, by various Government departments, of articles made in such shops. That being a joint provision applicable to all Government agencies we rather thought that the reorganization plan had probably not transferred the present authority to the Federal Security Administrator. It is an authority which seems more appropriate to the officer responsible for the Procurement Division of the Treasury Department.

Mr. WILLCOX. Section 343 (a) is adopted from existing law (21 U. S. C. 227, 237).

Mr. BULWINKLE. Any changes in it whatsoever?

Mr. WILLCOX. There are some verbal changes; very slight, made in the interest, we thought, of clarification. Subsection (b) (1) also is existing law (21 U. S. C. 230).

Subsection (b) (2) would be a new provision of law. It would make applicable to Federal prisoners engaged in industry in the



Public Health Service hospitals the same right to commutation of sentence for good conduct and to deduction from sentences, as is now provided by law (see 18 U. S. C. 710) for Federal prisoners confined in other institutions. We should like to check this provision with the Department of Justice, and may wish to suggest some revision of it. I am not sure that it is correctly drawn at present, but our objective is to treat Federal prisoners who are engaged in work in one of these hospitals on exactly the same basis as though they were working in other Federal prisons.

The present law contains a provision that if an addict voluntarily submits himself to treatment he may be confined for the time necessary to effect a cure (21 U. S. C. 231). This provision has been held invalid by one district court, and is omitted from the bill. We are not persuaded of the correctness of that decision. If the committee agrees with us that it is reasonable to apply restraint to a man who has voluntarily submitted himself for treatment, we should be glad to see that provision restored to the bill.

I take it that persons who voluntarily enter one of these hospitals for treatment of addiction are pretty likely to change their minds about it after the drug is withdrawn. How important it is to be able to hold them by the use of physical restraint is a matter perhaps Dr. Parran should comment upon.

Dr. PARRAN. The purpose of the treatment is frequently thwarted by the symptoms which the addict experiences when the drug is withdrawn.

We have had voluntary patients submit to treatment and under the physical pressures of withdrawal symptoms they insisted upon release. In a few weeks they came back again, making a fresh start and hoping to be able to be cured of their addiction.

From a practical medical point of view it would be very desirable if they could be held, once they voluntarily have submitted themselves, because from one point of view they really have not the power of independent judgment at that particular time.

Mr. BULWINKLE. I do not see how you are going to take a man and keep him in confinement. We had the same problem with the Veterans' Bureau in the hospitals, when the hospitals were started, and had to send them there. It is a pretty hard thing to say.

Mr. REECE. I rather agree with you that there is some question as to the correctness of the decision of the court. However, a person cannot dispute that; but if we reenact that provision it would give emphasis to it, and I am thoroughly in accord myself with the view of the Department that these voluntary patients should be required to remain, if there is any way of requiring them to do so, until a cure has been effected, and for one I would like to see the provision go back in the legislation.

Mr. WILCOX. We made a considerable study of that, Mr. Chairman, and all I can say is that I think there is fair basis for belief that the validity of the provision might be sustained if such a case were carried to a higher court. It seems to us a reasonable restraint under all of the circumstances. That is about what it comes to; a voluntary undertaking by the man himself.

Mr. BULWINKLE. Does he sign any statement when he goes in that he will stay there until his cure is effected?

Dr. PARRAN. Yes.

Mr. WILLCOX. Yes.

Mr. REECE. In my observation, from the outside, it leads me to believe that it is a good provision and although in some individual cases that power of the Government to require, to impose this provision, may be contested; but in the great majority of cases it is not, and I think it would act as an influence on the patients who have the best hope of effecting a cure of remaining, and for that reason I think it serves a good purpose.

Mr. BULWINKLE. Well, we will study that, and prepare a proper amendment.

Mr. REECE. Yes. That is what I was going to say, if we think it ought to be considered, we really ought to consider keeping that provision in the bill, then, I would suggest Mr. Willcox prepare a proposed amendment, a proper amendment. Otherwise we might overlook it.

Mr. WILLCOX. We will be glad to submit a proposed amendment, Mr. Reece.

Mr. BROWN. Of course, the courts can order a person into an institution, can they not?

Mr. WILLCOX. Not unless he is convicted of a crime.

Dr. PARRAN. Drug addiction, per se, is not a crime, but to pursue the occupation of a drug addict, generally speaking, does involve criminal action in the purchase of narcotics, which purchase and sale is prohibited by law.

Mr. BROWN. You mean the Federal law, or State laws?

Dr. PARRAN. The Harrison Narcotics Act.

Mr. BROWN. Yes. I know that selling and buying, and so forth and so on, of narcotics is a crime. I am talking about where a person is found to be a confirmed drug addict. Are there not some States which permit the court to order such person in for treatment?

Dr. PARRAN. I am not informed on that, Mr. Brown.

Mr. BULWINKLE. You can do it under some State laws?

Mr. BROWN. You can do it under certain State laws.

Mr. BULWINKLE. You can do it if you find that a man is mentally incompetent either from drinking or the use of drugs and you can appoint for him a guardian. The court designates the guardian.

Mr. BROWN. I am sure in Ohio—I am not speaking from personal experience—but I am sure in Ohio that we have a provision of law where a person is found to be a confirmed drug addict, that he can be sentenced.

Mr. BULWINKLE. They can be adjudged to be incompetent to manage their own affairs.

Mr. BROWN. And they have to take treatment under supervision of the court.

Mr. REECE. I think Ohio is just showing a further example of the capacity of leadership.

Mr. BROWN. Certainly; we admit that.

Mr. REECE. In enacting legislation of that kind.

Mr. BROWN. I can see where a Federal court would not take jurisdiction unless there was a crime committed.

Mr. BULWINKLE. It came up in a habeas corpus proceeding in a Federal court, and the man was released. That is the way I imagine this district court came into it.

Mr. WILLCOX. That is right, sir.

Section 344 relating to voluntary patients has been modified from existing law as set forth in Twenty-one United States Code Two Hundred and Thirty-two, so as to vest the authority to make determinations in particular cases in the Surgeon General instead of in the Federal Security Administrator.

Dr. PARRAN. Mr. Chairman, one of the members of the committee in earlier testimony raised a question as to the language at the top of page 44, which is section 344 (b), regarding the restrictions, namely, that voluntary patients shall not be admitted unless suitable accommodations are available. I am not sure whether the record is clear as to the wishes of the committee with reference to the language of lines 2 to 4, page 44.

Mr. WILLCOX. That language, I believe, is exactly the same as the present law.

Mr. REECE. You mean as now written?

Mr. WILLCOX. Yes, sir.

Mr. REECE. Well, what do you think about it, General, about changing it?

Dr. PARRAN. The problem had not come up. The theory, I assume, which led to the enactment of that provision was that these institutions were primarily for the care of persons, for whose care the Federal Government had a responsibility, namely, they had been convicted under the laws of the United States; and then so far as facilities were available, such facilities should be used for voluntary patients. I do not think there would be a difference from a practical point of view, whether that clause is in or not.

Mr. BROWN. In other words, it is not the policy of the Government to erect hospitals for voluntary patients; but rather that these hospitals are provided for wards of the Nation.

Dr. PARRAN. Primarily for wards of the Nation, but there are certain provisions for voluntary patients.

Mr. REECE. If the question has not come up, I will not press for a change or modification of the present law.

Mr. WILLCOX. In section 345 (a) a present prohibition (21 U. S. C. 234) against introducing narcotic drugs into narcotic hospitals is broadened to include the introduction of weapons or other articles specified in regulations, specifically including any letter, message, or any alcoholic beverage so specified.

Mr. BROWN. What kind of a letter?

Mr. WILLCOX. I was a little surprised to find that, to tell you the truth. I do not quite know what is back of that.

Dr. PARRAN. It is my recollection that we have had some trouble as regards conspiracies being hatched between inmates and persons on the outside, either for smuggling narcotics into the institution or aiding and abetting in the escape of prisoners, and I think I am right in saying this language follows the present law in reference to other penal institutions of the United States.

Mr. BROWN. Well, now, that letter, so specified, qualifies that so that it would apply to the ordinary letter.

Dr. PARRAN. I assume it would have the practical effect of enabling letters to be opened, if not censored, at least opened and the contents examined.

Mr. REECE. Let us read this just a little more carefully.



Mr. BULWINKLE. I do not like the wording so much.

Mr. BROWN. I can see where a person might send a letter to a relative or some close friend. If an ordinary letter, I do not see why that should be examined.

Mr. BULWINKLE. All letters would be, no doubt, opened anyhow, would they not?

Mr. REECE. No; they are not.

Dr. PARRAN. I am not sure of the present practice, Mr. Chairman.

Mr. REECE. I am quite sure they are not.

Mr. BROWN. What do the words "so specified" mean then?

Mr. SCOTT. Do you not have a lot of trouble between the addicts and the fellows who sell them the drugs? Is not that possibly the thing that the regulation of the hospitals are designed to prevent; that is, any correspondence between the addict and the seller, who is on the outside usually and is rarely convicted?

I have tried a lot of drug addicts, and I know how practice was to try to separate the addict from his contact with the outside world, for a period long enough to cure him. Do you not think that maybe it is that kind of a letter that they are trying to stop, which says, "Get in touch with John at the corner of" so and so, such and such, "when you get out and he will supply you with the same old thing."

I am wondering if that regulation of the hospital or the institution is not designed to prevent that kind of correspondence.

Mr. WILLCOX. I assume that is the purpose of it. I do not know whether the language is proper. Dr. Parran says that it is the same language as in other Federal criminal statutes. That may be a sufficient answer. I have not checked that.

Mr. BROWN. What is the meaning of the words "so specified"?

Mr. WILLCOX. I take it that that means specified in the regulations.

Mr. BROWN. That is what I want.

Mr. WILLCOX. It says, "or any other article or thing specified in regulations," specifically including "any letter, message, or alcoholic beverage so specified."

Mr. REECE. I just want to be careful not to get myself in a position where I might get in trouble by communicating with some of my friends.

Mr. BULWINKLE. Would it not be better draftsmanship to say that "any habit-forming narcotics, drugs, weapons, or any alcoholic beverage," then come on down to your letter proposition after it?

Mr. WILLCOX. I do not know why the alcoholic beverage need be specified in the regulations, except that perhaps there may be—

Mr. BULWINKLE (interposing). "Habit-forming drugs, or alcoholic beverages, weapons, or any other article or things specified in the regulations," and then go on down to your letter and message proposition, if that is what you want.

Mr. REECE. Well, as this is written now, is the phrase "including any letter, message," limited by—

Mr. BROWN. "So specified."

Mr. REECE. "So specified"; yes.

Mr. WILLCOX. I think it is.

Mr. BROWN. I think the regulations must set out what letters and what messages are included. The ordinary letter or message does not mean anything.



Dr. PARRAN. It seems to me that all of the language at the top of page 45 is conditioned by the language at the beginning of the subsection:

Any person not authorized by law or by the Surgeon General who introduces or attempts to introduce—

the things specified—

shall be guilty of a felony.

Mr. REECE. Well, now, if this becomes a law, would a person on the outside, unfamiliar with the regulations, who in due course wrote someone who is being treated in the institution, and if there should be some regulation in effect contrariwise, would he be guilty of a felony?

Dr. PARRAN. Certainly such is not the intent of this.

Mr. REECE. That is the only thing I have in mind, that a person might find himself in a position of being, within the discretion of whether someone wanted to prosecute him or not, of having committed a felony.

Mr. WILLCOX. Dr. Parran, would it meet your views if the authority with respect to letters and messages was simply to hold them up rather than to have a criminal sanction?

Dr. PARRAN. Yes; except that—and I repeat—the whole section is directed at persons not authorized by law who introduce such letters; and the postman would not be an unauthorized person.

Mr. REECE. Who is authorized by law?

Dr. PARRAN. The postman. As I recall, some of the difficulty we have had is—there is one instance, in which an attendant or guard had been bribed to smuggle things into a hospital—weapons, narcotics, letters, and messages—which had to do later with the escape of an inmate. All we could do in such a case was to dismiss the guard, and there was no penalty of law against him for his acts.

Mr. BROWN. Doctor, I am thinking of the hundreds of letters we all get from veterans. For instances, some of those letters are rather peculiar. They want help, or they are not being treated right in the hospitals, or something else. All right, you write a letter to a veteran. You do not know what he is in the hospital for, lots of time. You do not even know that he is in the hospital, perhaps. You have his address. I am just wondering what would happen in case the veteran was taking treatment for addiction, or he may be a prisoner, we will say. Once in awhile your constituents get in jail. Or they might happen to be in there taking treatment, or might have a narcotic conviction, and I wonder if we would be violating the law by sending a letter to him in the hospital.

Dr. PARRAN. Mr. Chairman, I think the intent on the part of all of us is the same, and may I suggest, in order to save time, that we ask the lawyers to attempt to write a revision of this section along the lines suggested?

Mr. SCOTT. Referring to delivery by postman, who is a person authorized by law, and not interdicted by this section. That is your thought?

Mr. REECE. And as the major has suggested, I am inclined to think that whoever does the drafting might consider making this offense in this a misdemeanor rather than a felony if that would enable the

department to accomplish its purpose; and you might also consider that it might not even be more effective in enabling the department to effect its purposes because it might be more easily enforced.

Mr. WILLCOX. That is a good suggestion, Mr. Reece.

The next part, part F, beginning at the bottom of page 45 and running to the top of page 49, relates to biological products, such as serums and antitoxins. As it appears in the bill it involves only a few verbal changes from existing law (42 U. S. C. 141-148).

This part is taken, in the main, without change from the present law. I say, "in the main." I want to point out two or three changes and to suggest further changes.

The inclusion on page 46, lines 3 to 5, of arsphenamine or its derivatives or other organic compounds analogous thereto is taken from appropriation acts (see p. 16, Public Law 135, 78th Cong., Labor-Federal Security Agency Appropriation Act, 1944). This addition never having been written into the basic law.

We wish to recommend some change in this provision, and an insertion elsewhere in the bill, to clarify the line of division in this field between the authority of the Public Health Service and that of the Food and Drug Administration. The change we suggest at this point is to make the parenthetical clause read "(or any other trivalent organic arsenic compound)." This would provide, I am told, a clear boundary of the Public Health Service jurisdiction in this field.

Mr. BULWINKLE. Just one minute. I want a little explanation there.

Mr. WILLCOX. I am afraid I will have to refer that question to the doctors.

Dr. PARRAN. Mr. Chairman, when the arsphenamines were first discovered as remedies for syphilis, the methods of testing them involved the use of animals—rats and other animals. At that time, the Congress did not anticipate that other arsenical compounds would be developed which would be effective. The arsenamines are trivalent. Later a simpler series of compounds within the trivalent series was developed for the treatment of syphilis, and we found ourselves in the position of not being authorized to control the quality of such compounds. Therefore, language was added to the appropriation acts to take care of the newer developments in science. The slight change, or more specifically, division of the other arsenic compounds, as suggested by Mr. Willcox, meets the present state of our scientific knowledge. There are many compound drugs used in the treatment of syphilis—bismuth, mercury, and others—which are subject to control by the Food and Drug Administration along with its other broad authority. However, because of the difference in the method of testing and the historical call upon the National Institute of Health, to deal with this subject, it has been agreed that in this particular field the control shall continue to rest in the Institute of Health.

Mr. WILLCOX. The Federal Food, Drug, and Cosmetic Act of 1938 contains a provision that it should not be considered as repealing or modifying the Biologics Act, but it contains no express exclusion from its terms of products licensed under the Biologics Act. By administrative interpretation such products have been held to be

exempt from the new drug provisions of the Federal Food, Drug, and Cosmetic Act, those provisions establishing a licensing procedure similar to that under the Biologics Act. We recommend the inclusion in this bill of a provision expressly exempting such products from that one provision of the Federal Food, Drug, and Cosmetic Act, but confirming what we believe to be the present legal situation, that such products are subject to all other provisions of that act.

That would leave the products subject to the misbranding and adulteration provisions, and, in particular, to the seizure provision of the Food, Drug, and Cosmetic Act.

Mr. BULWINKLE. That would be in section (b) ?

Mr. WILLCOX. It might be inserted in this section somewhere, or it might be placed in the miscellaneous provisions at the end of the bill.

Mr. BULWINKLE. Now, you have got (b) which is apparently a part of the Food, Drug, and Cosmetic Act anyhow, according to my recollection.

Mr. WILLCOX. The main difference, as I understand it, Mr. Chairman, is that the Public Health Service does not have any seizure power under the Biologics Act and if one of these products gets out and is defective, we think it important that the authority of the Food and Drug Administration to pick it up where it finds it should be continued.

Mr. BROWN. That is something like this sulfa drug that they put out some time ago and killed a number of people down in Tennessee.

Mr. WILLCOX. That is the sort of situation that might be involved.

Mr. BULWINKLE. I want to know what you are talking about in (b). You say:

No person shall falsely label or mark any package or container of any virus—and so forth. That is a violation of the Food, Drug, and Cosmetic Act anyhow, is it not?

Mr. WILLCOX. That is true, sir. The remedy, however, of the Food and Drug Act is not available to the Public Health Service, the effective remedy in such cases to protect the public being the seizure power. It may be there is some duplication in paragraph (b), and it may be that we should consider that.

Mr. BULWINKLE. It would require an amendment, if it is a duplication of the Pure Food, Drug, and Cosmetic Act.

Dr. PARRAN. Except, Mr. Chairman, subsection (b) relates only to "virus, serum, toxin, antitoxin, or other product aforesaid," while the control over such products is excluded by provision in the Pure Food, Drug, and Cosmetic Act.

Mr. BULWINKLE. Is it? I had forgotten about that.

Dr. THOMPSON. There is a special part of the Food and Drug Act which pertains to biologics, which exempts them.

Mr. BULWINKLE. We had passed some amendment to the Pure Food and Drug Act in the last 2 or 3 years in regard to these toxins, or serums. I had forgotten about it.

Mr. WILLCOX. That was with regard to insulin, Mr. Chairman.

At the present time it seems fairly clear that all of these products are subject to the Food and Drug Act, except for the new drug provision of that act.



Mr. BULWINKLE. And it is suggested by Mr. Randolph that a provision of the Federal Trade Act refers to that. Have you looked at the Federal Trade Act as to labeling?

Mr. WILLCOX. That has to do with the advertising, as distinguished from the labeling, Mr. Chairman.

Mr. BULWINKLE. Advertising and broadcasting of the contents of it.

Mr. WILLCOX. Yes, sir.

Mr. BULWINKLE. We do not want to run into or have too many agencies of the Government going around and seizing things.

Mr. WILLCOX. That is right. The Food and Drug Administration, of course, is also a part of the Federal Security Agency, and I believe that the enforcement activities can be effectively correlated to avoid any duplication. The only thing that we are particularly concerned with is to make sure that the broader legal remedies of the Food and Drug Act be preserved with respect to these biological products.

Mr. BULWINKLE. Have you gone over this with the Pure Food, Drug, and Cosmetic people?

Mr. WILLCOX. Yes, sir; these suggestions are made as a result of discussions between them and the Public Health Service.

Mr. BULWINKLE. Go ahead, sir.

Mr. WILLCOX. Subsection (d) of section 351 has been reworded to provide guides for the promulgation of administrative regulations governing the issuance of licenses. That is the language in lines 21, 22, and 23 of page 47—

to insure the continued safety, purity, potency, and efficaciousness of such products.

Section 352 is new matter, but I understand accords with present practices.

Subsection (a) would authorize the Public Health Service to prepare biological products for its own use, while subsection (b) would authorize it to prepare them for the use of other Government agencies, and for public or private agencies when the products are not available from licensed establishments.

Mr. BULWINKLE. Is that in existing law now?

Mr. WILLCOX. Not in express terms, sir. I think probably the legal authority for that exists in connection with the laboratory functions of the service.

Dr. THOMPSON. That is right.

Mr. BULWINKLE. Well, do you supply much of these products?

Dr. THOMPSON. There are two main ones, Mr. Chairman, yellow fever vaccine which is supplied to the Army, and typhus fever vaccine. Those are not manufactured at the present time by chemical concerns, but they have to be manufactured for use of the Army. There is also Rocky Mountain spotted fever vaccine.

Mr. WILLCOX. The next part, part G, relates to quarantine and inspection. This is a field in which, it seems to me, codification is most urgently called for. The existing statutes are both long and confused, and there is much overlapping of different provisions.

For that reason, it is rather difficult to point specifically to the provisions of existing law which are picked up in each of the various sections and subsections.

The first sentence of section 361 (a) expresses what we think is the gist of a long and complex provision of the act of February 15, 1893 (42 U. S. C. 92). That statute authorizes regulations to prevent the



spread into the country, or between the States, of contagious or infectious diseases. It conditions the issuance of such regulations on the nonexistence or inadequacy of State and local regulations; yet it contains the inconsistent requirement that Federal regulations must be uniform. It provides that Federal regulations, when issued, shall be enforced by the State and local officers if they are willing to do so, but that if they fail or refuse to do so the President shall execute and enforce the regulations.

The States, as I understand it, have wholly withdrawn from the field of foreign quarantine regulation. So far as this part of the authority is concerned, the conditions upon the exercise of Federal authority which may have been appropriate in 1893 seem no longer to have any function. In the field of interstate quarantine I think it is true to say in general that Federal regulation has been confined to matters pertaining to the interstate movement of people or things over which the States have both constitutional and practical difficulties in achieving effective control. In eliminating the conditions upon the exercise of Federal regulatory power, we believe that we have eliminated nothing of substance.

You will recall that in section 311 of the bill is a provision authorizing the Surgeon General to accept from State and local authorities any assistance in the enforcement of quarantine regulations which they may be able and willing to provide.

The same sentence in section 361 (a) would also supersede a specific authority of the Federal Security Administrator to make regulations, when the President determines it to be necessary, to prevent the interstate spread of cholera, yellow fever, smallpox, or plague (42 U. S. C. 95).

I take that today there would be no particular reason for selecting those four diseases for special legislation. Is that true, Dr. Parran?

Dr. PARRAN. That is true.

Mr. WILLCOX. The second sentence of subsection (a) would expressly authorize the Public Health Service to make inspections and take other steps necessary in the enforcement of quarantine. This is now done under regulations pursuant to the general authority referred to and similar provisions of law (see, e. g., 42 U. S. C. 93, 94, 105). I believe that this language might be changed so as more clearly to provide for the disposition of animals and articles which are potential sources of infection.

The remaining subsections of section 361 are designed to clarify, and perhaps to enlarge, the authority with respect to the apprehension and detention of individuals.

I might say that the general authority to invoke quarantine seems to have two rather different meanings—one being an authority to stop people at, let us say, the national boundary line or a State boundary line; and the other, which is commonly exercised under State quarantine laws, the authority to isolate individual persons who are considered dangerous to the community.

Under present regulations detention of persons occurs at ports of entry. There is a question, however, whether at present persons who could be detained for quarantine purposes may be released on condition—for instance, on condition that they report from time to time to health authorities in the cities and States where they are going—with

a power to punish those who violate the condition. Authority to use this means of enforcement has become important because of the rapidity of travel by air, and the possibility that persons who have been exposed to disease may enter the country and show no sign of disease at the time when they actually enter.

Subsection (b) is expressed as a limitation upon apprehension, detention, or conditional release of individuals, permitting such action only for diseases specified in Executive orders of the President upon recommendation of the National Advisory Health Council and the Surgeon General. At present the so-called quarantinable diseases are in a few cases listed in the statutes (see 42 U. S. C. 95, 105), but for the most part are set forth in regulations. In addition to lodging the power to specify diseases in the President, the principal effect of the subsection is to make clear that conditional release is permissible.

Subsection (c) would continue the authority, exercised under present law, to apprehend, detain, and examine individuals entering a State or possession from a foreign country or from Hawaii or a possession. For the reasons stated above, it also authorizes conditional release in such cases.

I may remark at this point that, by reason of the inclusion of Puerto Rico and the Virgin Islands in the definition of "possession" in section 2, this subsection would apply to persons coming into the continental United States from these islands.

Subsection (d) would write into law an authority which we believe probably exists under the present statutes (42 U. S. C. 92, and, as to the venereal diseases, 42 U. S. C. 25), but which is seriously doubtful and which has not been exercised. It would authorize the apprehension and examination of individuals reasonably believed to be infected with a communicable disease and to be moving or about to move from one State to another, or to be probable sources of infection to persons who will be moving from one State to another. If such persons are found to be infected, their detention would be authorized.

This subsection would apply only to diseases specified in an executive order under subsection (b).

Dr. Parran mentioned the other day the similar provision of section 363, which would confer like authority in time of war, but would be predicated upon the protection, not of interstate commerce, but of members of the armed forces and war workers.

While we believe that this authority exists under present law, we were advised by the Attorney General against attempting to assert it without a clearer legislative basis than now exists. As I believe Dr. Parran stated, the only diseases with respect to which there has been any thought of using such an authority at present have been the venereal diseases, but these provisions are written in broader terms in order to make it possible to cope with emergency situations which we cannot now foresee.

Mr. BULWINKLE. Let me go over that. That was in (2) of (d)—to be a probable source of infection to individuals who, while infected with such disease in a communicable stage, will be moving from a State to another State.

Do you think that covers someone at one of these war plants, who has an infectious disease?

Dr. PARRAN. You are referring to page 50, Mr. Chairman.

Mr. BULWINKLE. Yes, sir.

Dr. PARRAN. The added authority in time of war is stated in sections 363 on page 51. The more limited authority which exists in time of peace or war is stated as you have described under subsection (d), page 50.

Mr. BULWINKLE. That could be drawn a little clearer.

Mr. WILLCOX. We have struggled with that wording, Mr. Chairman, and I am not too happy with the wording we finally wound up with.

Mr. BULWINKLE. I am not either.

Mr. WILLCOX. We would be very glad to have suggestions for its improvement.

Mr. BULWINKLE. We will have to look into that when the time comes.

Mr. WILLCOX. Yes, sir.

Mr. BULWINKLE. I do not think it is going to be construed to mean what you said it meant in your construction of it.

Mr. WILLCOX. What we have in mind there, Mr. Chairman, was the case, for instance, of infected prostitutes who in the course of their trade infect large numbers of persons, and it is almost a mathematical certainty that certain of those persons will move into other States before the incubation period of the disease has passed.

The next section, 362, is taken from present law (42 U. S. C. 111) without change except that the authority now in the President would be vested in the Surgeon General to be exercised under presidential regulations.

Section 363, Dr. Parran and I have mentioned in connection with section 361 (d).

Section 364 (a), again, is a condensation of several provisions of existing law (42 U. S. C. 92, 102, 103, 105). The requirement of presidential approval for the selection of sites for quarantine stations would be new, the reason for this change being that other agencies of the Federal Government besides the Public Health Service are concerned with the location of such stations, and that appears the most practical procedure of getting the necessary concurrence of the several departments.

There are in present law several provisions bearing on the acquisition and designation of such sites. One of them (42 U. S. C. 104) requires other departments of the Government which may have custody of the land or water involved to turn it over to the Federal Security Administrator. If title is not in the United States the Federal Security Administrator is authorized to buy the site at a reasonable price, if possible, and otherwise to ask the Attorney General to institute condemnation proceedings. There is provision, further (42 U. S. C. 105), for the publication in newspapers of notice of the selection and designation of the sites. We doubt that these provisions, which are apparently still on the statute books, serve any function at the present time.

I think we should make further study of those provisions before submitting any final draft to the committee, Mr. Chairman.

Mr. BROWN. Of course your Health Service has to go wherever the ports of entry may be. Now, thinking of the development of commercial aviation, Chicago perhaps may be a port of entry and that would not make any difference, you would have to have a quarantine station there just the same as you would have at a sea port.



Dr. PARRAN. Washington is now an airport of entry, for example, and we have recently assigned an officer here as a quarantine officer at the port of Washington.

Mr. BROWN. They are flying here; yes.

Mr. WILLCOX. Subsection (b) of this section makes no change in the present law (42 U. S. C. 92 (a)), though the opening words of the subsection should be changed to indicate that regulations are to be made only with the approval of the Federal Security Administration.

The first sentence of section 365 (a) is, I believe, taken from existing law, though I am unable at the moment to indicate its source. We want to be able to check that further. The second sentence is a restatement of present law (42 U. S. C. 93) with a slight change, requiring reports from consular officers at such intervals as the Surgeon General shall prescribe instead of requiring them weekly.

Subsection (b) is taken from existing law (42 U. S. C. 97), although it has been reworded in the interest of simplicity.

Section 366 relating to bills of health involves no substantial change of law, but again, the provisions (42 U. S. C. 82) have been rearranged and simplified.

The next section, 367, would authorize the Surgeon General, under regulations approved by the Federal Security Administrator, to make applicable to civil air navigation any of the provisions of sections 364, relating to quarantine stations, 365, relating to the duties of consular and medical officers in foreign ports, and 366, relating to bills of health. Any of these provisions could be made applicable to such extent and upon such conditions as are necessary for the safeguarding of the public health. This is substantially the same as a provision in the proposed Civil Aeronautics Code.

Section 368 brings together and makes more consistent a variety of penalty provisions contained in the present quarantine laws (See 42 U. S. C. 85, 102, 106, 108). It also clarifies the application of the penalty provisions in certain situations—notably with respect to interstate quarantine regulations—where the present wording of the statute (42 U. S. C. 102) makes their application doubtful. It will be noted that the bill would provide a maximum penalty of \$1,000 or 2 years imprisonment, or both, for violation of any regulations under this part, or for unauthorized entry upon or departure from quarantine stations.

Subsection (b) treats in a similar manner the forfeiture provisions now contained in the quarantine laws (42 U. S. C. 81).

Subsection (c) continues the present authority contained in 18 U. S. C. 642, as extended to the Federal Security Administrator by two reorganization provisions, to remit or mitigate forfeitures provided under subsection (b).

Section 369 is a reenactment of present law (42 U. S. C. 99).

Section 370 raises a question with regard to the handling of authorizations for appropriations under the Code generally, where there are not specific authorizations—as there are, for instance, in connection with the grants of money to the States (42 U. S. C. 803). I believe this subject had better be discussed in connection with later provisions of the bill.

Mr. BULWINKLE. Now, the next is title IV. Is that the same as existing law?



Mr. WILLCOX. It is existing law (42 U. S. C. 137 and the following sections) with only verbal changes necessary to bring it into the Code. I would call attention to one change that I think we discussed here, Mr. Chairman, the change from \$500,000 to \$50,000 as a gift which would be entitled to acknowledgement.

Mr. BULWINKLE. I thought if anybody wanted to give \$50,000 they were entitled to acknowledgment, that we would not require a gift of \$500,000.

Mr. BROWN. Yes; I take it that is proper.

Mr. BULWINKLE. Now then, we have gotten down to where?

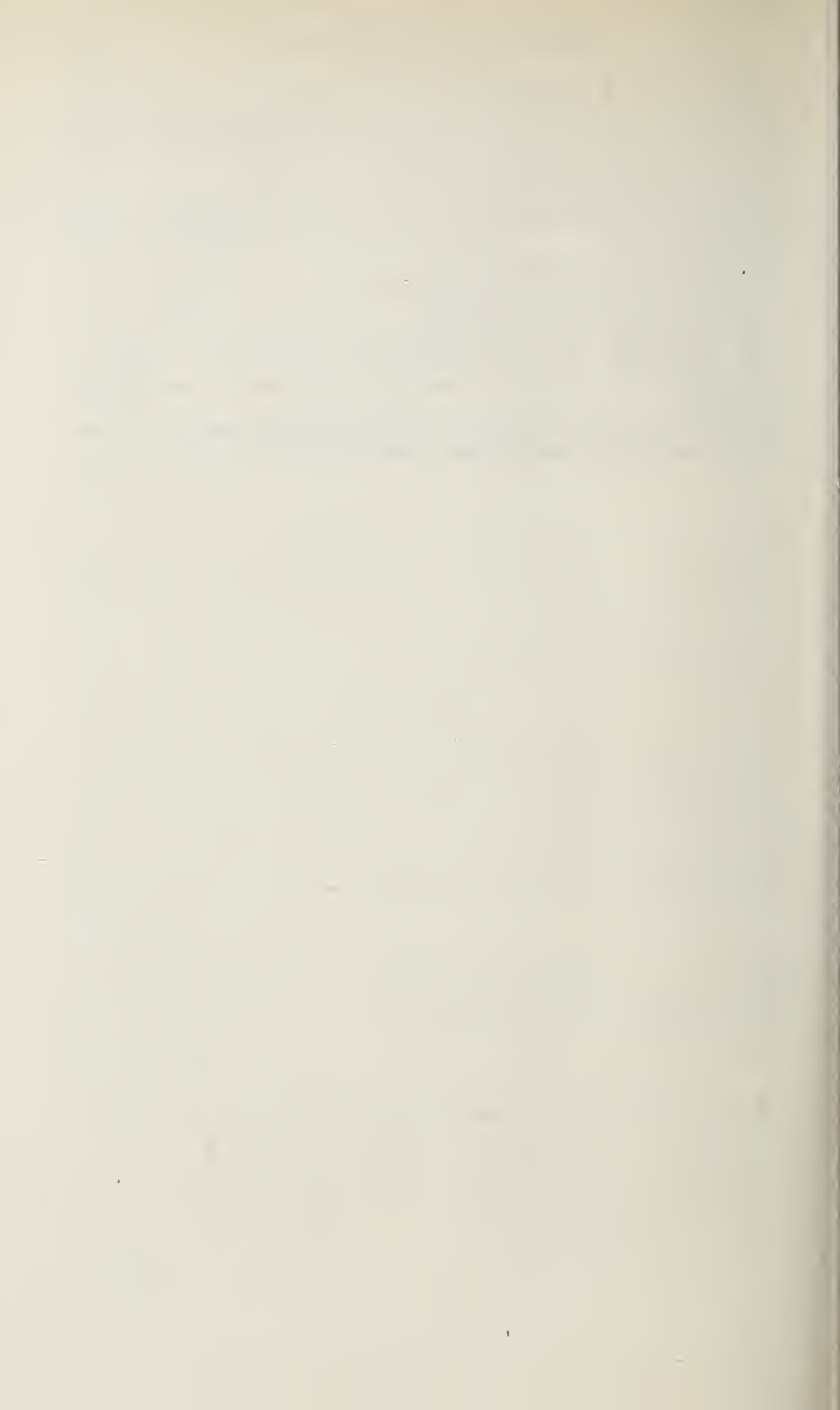
Mr. WILLCOX. Title V, on page 63.

Mr. BROWN. And it is now a quarter of 12.

Mr. BULWINKLE. I think at this title V we will quit for the day.

The committee will stand adjourned until tomorrow morning at 10 o'clock.

(Thereupon, at 11:45 a. m., the subcommittee adjourned to meet at 10 a. m., the following morning, Thursday, March 9, 1944.)



# PUBLIC HEALTH SERVICE CODE

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THURSDAY, MARCH 9, 1944

HOUSE OF REPRESENTATIVES,  
SUBCOMMITTEE OF THE COMMITTEE ON  
INTERSTATE AND FOREIGN COMMERCE,  
*Washington, D. C.*

The subcommittee met at 10 a. m., pursuant to adjournment, in room 1301, New House Office Building, Hon. Alfred L. Bulwinkle, presiding.

Mr. BULWINKLE. The committee will come to order. You may continue, Mr. Willcox.

**STATEMENT OF ALANSON W. WILLCOX, ASSISTANT GENERAL COUNSEL, FEDERAL SECURITY AGENCY; ACCOMPANIED BY LT. STANLEY L. DREXLER, UNITED STATES COAST GUARD—Resumed**

Mr. WILLCOX. Mr. Chairman, we had concluded yesterday with title IV of the bill. Title V includes several miscellaneous provisions which we think should be included in the codification, but some of which do not conveniently fit under other titles.

The first section, No. 501, is an authorization to accept gifts. Present law contains three such authorizations, one relating to gifts for study, investigation, and research in the fundamental problems of the diseases of man and matters pertaining thereto (42 U. S. C. 23b), the second relating specifically to cancer (*id.* 137 (e)), and the third to gifts to marine hospitals (24 U. S. C. 2). These provisions have been consolidated and made applicable to gifts for any of the functions of the Service. The consolidated provision is patterned on a statute (24 U. S. C. 181-184) passed in 1941 applicable to gifts to St. Elizabeths Hospital, which appears to provide satisfactory machinery for the handling of gifts, and spells out the procedures more fully than does any of the present authorities of the Public Health Service.

Section 502 is based on a provision that is carried in the annual appropriation acts. (See, e. g., Public Law 135, 78th Cong., Public Health Service, "Pay of personnel and maintenance of hospitals.") The Appropriation Act proviso is limited to the Ellis Island Immigration Station, and is mandatory upon the Immigration and Naturalization Service. The first sentence of section 502 would make the matter one for agreement of the agencies concerned, but would extend it to hospitals at all immigration stations.

The first sentence of section 503 perhaps more properly belongs in the preceding section.

Mr. BULWINKLE. Before we get off of section 502, let me ask you if this section is agreeable to the Immigration and Naturalization Service?

Mr. WILLCOX. I believe that it is, sir. I think that we had better check that again to make certain.

The first sentence of section 503 perhaps more properly belongs in the preceding section. We think it should be revised, moreover, to provide merely that the Immigration and Naturalization Service should pay over to the Public Health Service moneys paid by persons detained in hospitals of the Public Health Service. The present wording implies that there is to be reimbursement in all cases, whether or not there is a charge made to the patient, and that is not intended.

The second sentence of section 503 would provide generally that money collected from pay patients of the Public Health Service shall be covered into the appropriation from which the expenses of their care were paid. With certain exceptions, the present law provides that such receipts be covered into miscellaneous receipts of the Treasury (42 U. S. C. 33a). The Bureau of the Budget has expressed no objection to this proposed change.

Section 504 is mainly a restatement of existing law. A provision that insane patients of the Public Health Service shall be entitled to treatment at St. Elizabeths Hospital now appears in the law applicable to St. Elizabeths Hospital (24 U. S. C. 193). Since St. Elizabeths is no longer in the Public Health Service, as it was when this bill was drafted, I suggest that admission to that hospital be ordered by the Federal Security Administrator, as under present law, instead of by the Surgeon General.

Mr. PRIEST. That would be an amendment in lines 17 and 18.

Mr. WILLCOX. It would be an amendment in lines 17 and 18; yes, sir. When the hospital was a part of the Public Health Service it seemed to us rather unnecessary to have that matter come up to the Administrator's office.

Since the provision in the St. Elizabeths law is not exclusive, it follows that persons entitled to treatment by the Public Health Service when sick do not lose that right because the sickness happens to be mental. The second part of the first sentence would confirm the present legal situation in this respect.

In substituting this section for the present St. Elizabeths law we have omitted provision for reimbursement of that hospital. The last sentence was intended to relate to the disposition of reimbursement of the Public Health Service in cases where such reimbursement is made, and should be clarified to this effect.

Under Executive Order 9079 the two narcotic hospitals of the Public Health Service have been made available for St. Elizabeths patients. As some of those patients are not otherwise eligible to Public Health Service care, and as the authority (42 U. S. C. 8) under which the Executive order was issued will terminate with the war, we suggest a temporary provision authorizing the continued treatment of such persons as may be in those hospitals when the war ends.

I might say that the whole subject of Government care of the insane, mental diseases, is receiving a good deal of study at the present



time, Mr. Chairman, and our thought was that while it may be desirable in the not distant future to recommend some change—

Mr. PRIEST (interposing). Mr. Willcox, may I ask a question there? In connection with this, do I understand that the suggestion is a temporary provision of law to that effect?

Mr. WILLCOX. Yes, sir. That is merely a stopgap arrangement. The situation today is that under Executive order for the duration of the war, insane patients who are normally entitled to treatment in St. Elizabeths Hospital may be taken, and many of them have been taken into the so-called narcotics hospitals of the Public Health Service. That arrangement, I gather, was necessary because of the very crowded conditions of St. Elizabeths. That authority would, as a matter of law, expire upon the termination of the war, because it is under the authority of the President to use the Public Health Service in time of war. The only change of substantive law we are suggesting here, apart from the question of the reimbursement, is the stopgap arrangement, so that those hospitals would not be required to turn out patients who might happen to be there at the time when the war ends.

As I say, it is quite possible that the Agency may have rather more far-reaching recommendations to make, perhaps, before the war is over; but we are not making any such recommendations at this time.

Mr. PRIEST. My main thought in asking the question, since this is a recodification and we are attempting to do a rather permanent job here, was to inquire if such a provision could be well drafted to fit into such an act as this or if there was some other possible way that it might be handled without writing a purely temporary provision into a permanent law.

Mr. WILLCOX. Mr. Priest, there is a title in this bill at the end called "Temporary and emergency provisions," which will not be a part of the code, so-called.

Mr. PRIEST. Well, that would clear up my question entirely.

Mr. WILLCOX. Section 505 would reenact, insofar as applicable to the Public Health Service, an act passed in 1936 and made applicable to both the Coast Guard and the Public Health Service (14 U. S. C. 71).

Section 506 I have already discussed in a connection with the benefit provisions.

Section 507 is the same as existing law (42 U. S. C. 69) except that the figure \$1,000 has been substituted for \$500.

Section 508 would require the Surgeon General to make an annual report to Congress. The present law requires that he submit a report to the Federal Security Administrator for transmission to Congress.

I do not know why this change was made and I believe that the present law is satisfactory, is it not, Dr. Parran?

Dr. PARRAN. The present law is satisfactory.

Mr. WILLCOX. I suggest that might be revised to accord with the present law then.

Mr. PRIEST. You recommend that?

Mr. WILLCOX. Yes, sir.

In this connection, I should call attention to the omission from the bill of the separate requirement of a report under what is now title VI

of the Social Security Act. As this subject would, of course, be covered in the general report for the Public Health Service we have omitted the separate requirement.

Title VI of the bill includes temporary and emergency provisions and repeals, and would not constitute a part of the Public Health Service Code.

Section 601 is designed to assure that enactment of the code should not affect the term or tenure of office of existing personnel, and should not abolish existing positions or units of the Service except as reorganization may be effected under its terms.

Section 602 would preserve existing regulations until repealed or until superseded by regulations made under the new act. In view of the volume of the Public Health Service regulations now in force, it will be a time-consuming matter to revise them to accord with the new statute.

Section 603 is designed to assure the continued availability of existing appropriations and other funds and to authorize, with the approval of the Director of the Bureau of the Budget, such transfers of funds between appropriations as may be necessary for the continuance of transferred functions. As the authority to reorganize the Service, conferred by section 202, is a continuing authority, I suggest that the provision for transfer of funds should likewise be a continuing authority.

Section 604 would reenact an authorization to appropriate \$1,500,000 for emergency construction and for extension of Public Health Service facilities. A similar authorization was enacted in 1919 (40 Stat. 1303, sec. 6) but was never availed of. When the present bill was being drafted we concluded that the authorization was still in force, and for that reason included it in the bill but limited it to the duration of the present war and 6 months thereafter. The Bureau of the Budget recommends that it be deleted, and we have no objection to doing so.

Section 605 would amend the United States Employees Compensation Act. I have already discussed this section in connection with the benefit provisions. As I then indicated, I believe that some revision of language may be desirable.

Mr. PRIEST. Mr. Chairman, may I ask a question?

Mr. BULWINKLE. Mr. Priest.

Mr. PRIEST. I have a note here, I believe it is your suggestion, Mr. Willcox, that possibly section 605 might be transposed to title II of the bill. Was that your suggestion?

Mr. WILLCOX. Mr. Priest, since that discussion, I have been thinking further about the matter and I believe the thought was that those sections of the bill which amend the text of other statutes are perhaps better carried outside of the code. I think my suggestion was perhaps ill advised.

Mr. PRIEST. And it is your opinion that it is properly placed in the bill?

Mr. WILLCOX. I think probably it is better to leave it in title VI.

Section 606 was also discussed in connection with benefits. I believe that this subject properly belongs in title II rather than in title VI of the bill. That does not amend another statute.

Section 607 was designed to make retroactive to December 7, 1941, certain of the benefit provisions. This has already been accomplished

by section 10 of Public Law 184, and I believe this section should be revised to constitute a mere saving clause in conjunction with the proposed repeal of Public Law 184.

Section 608, which would amend the Soldier's and Sailor's Civil Relief Act, has also been discussed in connection with the benefit provisions.

Before speaking of the repealing section I should like to revert to a subject which I mentioned yesterday. In connection with section 370 I suggested that I should like to discuss the general question of authorizations to appropriate where there are no specific provisions in the bill.

It is my understanding of the House rule that when a function is vested by basic law in a given agency, that fact in itself constitutes an authorization to appropriate funds for the current conduct of that function. There is no need, that is to say, to use the words "There is hereby authorized to be appropriated." Certainly that is the situation today with respect to many functions of the Public Health Service.

In the case of the construction of buildings, on the other hand, I believe it is customary to enact specific authorizations. There is in the Public Buildings Act of May 25, 1926, what appears to be a general authorization of appropriations for the construction, among other buildings, of marine hospitals and quarantine stations. As this provision appears in a general statute now administered by the Federal Works Agency, I am not sure that it should be carried into this bill, as would be done by section 370.

There is another group of provisions of existing law which are related to appropriations which probably should be picked up in this bill. It is provided, for example, in the National Institute of Health Act (42 U. S. C. 23d) that the Federal Security Administrator may make expenditures for books of reference, periodicals, and exhibits, and for printing and binding. Other provisions of the same general sort appear in other statutes. Such provisions avoid the necessity of repeating such authority every year in the appropriation acts, and I suggest for the committee's consideration another section which would pick up these provisions of existing law.

Section 609 provides for the repeal of the existing statutes from which the many provisions of the code have been drawn, as well as of statutes which have become obsolete or have been superseded without express repeal. This section has been carefully studied, but it will require much further work before we can assure your committee that it is satisfactory.

Mr. BULWINKLE. Time is limited here, you know.

Mr. WILLCOX. I appreciate that, sir.

Mr. PRIEST. In going over the large number of statutes affected, I am rather convinced that the committee will have to accept your judgment on whether it is complete or incomplete; your judgment and that of others who have worked on it.

Mr. WILLCOX. We have done a good deal of work on that, sir. It is a matter to be sure on. Mr. Perley has done some work on it too. I hope we will be able to get some more advice from him.

Mr. BULWINKLE. Do you have anything further?

Mr. WILLCOX. I do not have anything further to present, Mr. Chairman.



Mr. BULWINKLE. Will you stand by then?

Mr. WILLCOX. Yes, Mr. Chairman.

Mr. BULWINKLE. Doctor, is there anyone else you wish to go on now?

Dr. PARRAN. No, Mr. Chairman. I think we have no new matter to present.

As I recall it, there were a few instances in which decision was reserved for later consideration in connection with some of the provisions which previously were under discussion. One particular provision to which I think you made reference was the present lack of authority under the terms of the bill for officers over the age of 64 to be continued on active duty or to be recalled to active duty in time of war. We would have no objection to the insertion of such a provision, provided it was made clear that such officers being recalled would be in excess of the annually authorized strength. We would be stopped from recalling such officers if the limitation as to number of officers on active duty continued.

#### STATEMENT OF LT. STANLEY L. DREXLER, UNITED STATES COAST GUARD RESERVE

Mr. BULWINKLE. Mr. Drexler, you represent the Coast Guard here.

Lieutenant DREXLER. Let me explain now, Mr. Chairman, if I may, that my appearance at these hearings up to this point has been primarily to assist Mr. Willcox and to represent the Public Health Service. Since the time when I first worked on this bill I have become an officer in the Coast Guard and the Coast Guard does have some comments to make on the bill, which they have asked me to make as soon as they have cleared those comments with the Navy Department.

I have also been asked by Commander Corwin, assistant to the Judge Advocate General of the Navy, to request, Mr. Chairman, that if it is at all possible, you permit a representative of the Navy Department and perhaps of the War Department to appear before this subcommittee to present certain comments which the Navy and War Departments want to make on the bill.

The Navy and War Departments have not as yet had time to clear their proposed comments with the Bureau of the Budget. For that reason they would like as much time, before their representatives appear, as the committee can give them. I assume that the committee desires to finish the testimony and then go into executive session, without going back to hear any more testimony; but depending upon what the latest time is next week the committee can hear them, I should like to request that the committee hear the Navy and perhaps the War Department at that time.

#### STATEMENT OF LT. COMDR. JOHN A. BOND, UNITED STATES COAST AND GEODETIC SURVEY

Mr. BULWINKLE. Commander Bond of the Coast and Geodetic Survey is here, and we will be glad to hear you, Commander.

Commander BOND. Mr. Chairman, as the Public Health Service efficiently takes care of all of our medical problems, we are interested in any reference to the Coast and Geodetic Survey in the present bill.



On page 35 of the bill, line 10, it reads "and of officers and enlisted personnel of the Coast Guard and the Coast and Geodetic Survey." Technically, we do not have enlisted personnel. Our men are not enlisted in the same sense as are Coast Guard personnel. We take on a certain number of our crew under a period of shipment of 1 year; other personnel in the crew are under the civil service.

To make the wording conform with previous wording in other statutes we suggest that the term "members of the crew" be used, rather than "enlisted personnel."

Mr. PRIEST. "Officers and members of the crew of the Coast Guard and the Coast and Geodetic Survey"?

Commander BOND. I would suggest this: In line 10, after the word "Service" insert a comma and delete the word "and"; in line 11, after the words "Coast Guard" insert a comma, and after the word "and", following the word "Coast Guard", insert the words "officers and members of the crews of vessels of."

Mr. BULWINKLE. In other words, have two phrases; one applying to the Coast Guard and one applying to the Coast and Geodetic Survey.

Commander BOND. That will take care of our situation. That is the same wording, you will note, as is used at the bottom of page 34.

Mr. PRIEST. It is correct down there?

Commander BOND. Yes, sir.

As you know, we have legislation authorizing the Secretary of the Treasury—or now the Administrator of the Federal Security Agency—to detail medical officers of the Public Health Service to the vessels of the Coast and Geodetic Survey. I understand that is covered now in a blanket provision of the bill. Is that correct?

Mr. BULWINKLE. That is correct, Mr. Willcox.

Mr. WILLCOX. Yes. We suggested the insertion of a sentence especially authorizing the detail of officers on board vessels of the Coast Guard and the Coast and Geodetic Survey, in order to remove any possible doubt.

Commander BOND. That will be fine.

Mr. BULWINKLE. Do you have anything else?

Commander BOND. No, sir. I think that is all I have.

Mr. PRIEST. We thank you, Commander.

Commander BOND. Thank you.

Mr. BULWINKLE. Dr. Parran, do you have anything further?

Dr. PARRAN. Mr. Chairman, it occurs to me there are a few rather complicated problems with which the lawyers will be dealing, following the general attitude expressed by the members of the committee. Whether the committee would wish in a full open hearing like this for us to suggest more specifically the provisions for the changes which you have in mind, or whether in an off-the-record discussion such language would be arrived at—in one way or another it seems to me it would be helpful to the lawyers if the committee's views on a few problems could be further clarified.

I have in mind the section relating to title VI of the Social Security Act, the interstate quarantine provisions, and the provisions regarding narcotic patients and aiding and abetting their escape; smuggling narcotics to them. I recall those as three sections about which we have had considerable discussion, and if I were a lawyer I would not know how the committee would wish those sections to be revised.

Mr. BULWINKLE. Here is what the lawyer can do; here is what he is for; is to start off by giving a basis for us to use. The committee has not met to decide what we are going to do about any amendments yet. There have only been about four of us out of the total subcommittee here. So, after the studies of the lawyers—Mr. Willcox, and you, and the others—they will furnish us with a copy of the amendments that you think are necessary, as you think it should be, and we can amend those, or do anything we please with them; but it gives us a basis to work on.

Mr. BROWN. As I understand, Mr. Chairman, those particular matters mentioned by Dr. Parran were several subjects we requested information on at the time.

Mr. BULWINKLE. Yes.

Mr. BROWN. And were put over for further study and consideration and it was suggested that Dr. Parran and the attorneys go further into those matters, and to come in with their ideas so that we may have their advice and the benefit of their knowledge in finally reaching a decision; but I do not think any of those particular problems are so difficult but what they could be worked out.

Mr. PRIEST. There were some differences of opinion, and, as Mr. Brown has suggested, some questions, as to whether it was exactly in the language and made the provisions that were desired.

Mr. BROWN. I do not think there is any question but what we all want to accomplish the same thing. We want to be certain that we do protect the proper rights of individuals.

Mr. BULWINKLE. I am sorry that we did not have Mr. Calhoun down here today, but I thought you would probably take longer, probably all morning, and that is the reason I did not ask him to be here.

Mr. WILLCOX. Mr. Chairman, I wish to express my appreciation to the committee for the patience with which they have listened to the long presentation I have made on this matter.

Mr. BULWINKLE. We are going to express our appreciation to you after we get through with this.

Mr. PRIEST. Personally, I would like to express my appreciation of your thoroughness in the matter. I think you have been very thorough in giving all of these proposed changes and we appreciate your patience also.

Mr. WILLCOX. Thank you, sir.

Mr. BULWINKLE. Gentlemen, if there is nothing else this morning, the committee will stand adjourned until 10 o'clock tomorrow morning.

(Thereupon, at 10:45 a. m., the committee adjourned to meet at 10 a. m. the following morning, Friday, March 10, 1944.)

## PUBLIC HEALTH SERVICE CODE

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FRIDAY, MARCH 10, 1944

HOUSE OF REPRESENTATIVES,  
SUBCOMMITTEE OF THE COMMITTEE ON  
INTERSTATE AND FOREIGN COMMERCE,  
*Washington, D. C.*

The subcommittee met at 10 a. m., pursuant to adjournment, in the hearing room of the committee, New House Office Building, Hon. Alfred L. Bulwinkle, presiding.

Mr. BULWINKLE. The committee will come to order.

I will insert in the record this morning a letter from Dr. C. Willard Camalier, chairman, office of the committee on war service, of the American Dental Association.

Also a letter from R. P. Fischelis, chairman of the council of the American Pharmaceutical Association.

Also a letter from Hon. Raymond E. Baldwin, Governor of the State of Connecticut, endorsing a letter from Stanley H. Osborn, commissioner of department of health, State of Connecticut.

(The letters referred to are as follows:)

AMERICAN DENTAL ASSOCIATION,  
*Chicago, Ill., March 9, 1944.*

Hon. ALFRED L. BULWINKLE,  
*Subcommittee on Public Health,  
Committee on Interstate and Foreign Commerce,  
House of Representatives, Washington, D. C.*

DEAR CONGRESSMAN BULWINKLE: Dr. Sterling V. Mead, chairman of our committee on legislation, was out of the city at the time your invitation to appear at the hearings on H. R. 3379, entitled "A bill to codify the laws relating to the Public Health Service, and for other purposes," was received. This invitation was transmitted to me, and after reviewing the bill carefully, conferring personally with President C. Raymond Wells, Dr. Mead (by long-distance telephone), and others, I beg to state that the provisions of the bill appear quite satisfactory.

I might say, however, that the association is very hopeful that the United States Public Health Service will institute an enlarged program of dental research, to be utilized to assist the profession in solving some vitally important problems affecting the dental health of the people, with special reference to the etiology and cure of dental diseases. Plans to this end are now being considered.

Sincerely yours,

C. WILLARD CAMALIER, *Chairman.*

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AMERICAN PHARMACEUTICAL ASSOCIATION,  
*March 7, 1944.*

Hon. CLARENCE F. LEA,  
*Chairman, Committee on Interstate and Foreign Commerce,  
House of Representatives, Washington, D. C.*

DEAR MR. LEA: The American Pharmaceutical Association has followed with interest the development of the Public Health Service and has been pleased to



note the reorganization of the administrative divisions in the interest of greater efficiency. The codification of the laws relating to the Public Health Service now proposed in H. R. 3379 is a further step in the direction of administrative efficiency which has the unqualified approval of the pharmacists of the United States as represented by this association.

We believe that the professional personnel of the Public Health Service, which includes pharmacists, is provided for satisfactorily in this bill and if enacted into law, the provisions of this measure will assure to the Public Health Service an adequate supply of competent pharmacists who will be willing to follow a career of public service in this field, even though equal competence would probably result in more remunerative employment in civilian pursuits.

It is respectfully urged that H. R. 3379 be enacted into law as now written.

Very truly yours,

R. P. FISCHER,  
*Chairman of the Council.*

STATE OF CONNECTICUT,  
EXECUTIVE CHAMBERS,  
*Hartford, Conn., February 28, 1944.*

HON. CLARE BOOTH LUCE,  
*Congresswoman from Connecticut, Washington, D. C.:*

I am enclosing herewith a copy of a letter from Stanley H. Osborn, commissioner of health, which is self-explanatory.

Now is the time for us to correct the practice of the Federal Government and all its agencies dealing directly with our cities and towns and thus circumventing the State government and its agencies which has led to duplication and endless confusion. This provision of the bill should be corrected so that the procedure outlined in Dr. Osborne's letter can be continued. When our State health authorities go to a city and find that unknown to them the Federal Government is carrying on a program there, it just creates duplication in many instances and confusion in every instance.

I hope that you can give this matter your attention.

Yours very sincerely,

RAY BALDWIN, *Governor.*

STATE OF CONNECTICUT,  
DEPARTMENT OF HEALTH,  
*Hartford, February 25, 1944.*

The Honorable RAYMOND E. BALDWIN,  
*The Governor of Connecticut.*

DEAR GOVERNOR BALDWIN: I feel I should draw your attention to a bill which I have been notified is going to be heard about March 1 before the present session of the United States Congress. The bill is H. R. 3379, a bill to codify the laws relating to the Public Health Service, and for other purposes, which in section 214 (b), page 17, reads:

"(b) Upon the request of any State, or political subdivision thereof, personnel of the Service may be detailed by the Surgeon General for the purpose of assisting such State or political subdivision in work related to the functions of the Service."

This provision allows the United States Public Health Service to go into any State, or political subdivision—town, city, or borough, to give aid or to do any work they wish, without consulting or cooperating with the State health department in any way whatsoever.

The procedure at the present time is that when the towns, cities, or boroughs of Connecticut wish aid along public-health lines, they request the assistance of this department. If, for some reason, we are unable to furnish it, this department then requests aid from the United States Public Health Service. In a like manner, if the United States Public Health Service wishes to make any study or do any research work in the State, this department is first consulted and the work done in cooperation with us. In fact, title VI of the Social Security Act relating to public-health work, section 603 (a), has the following proviso:

"Provided, That no personnel of the Public Health Service shall be detailed to cooperate with the health authorities of any State except at the request of the proper authorities of such State."

Obviously, the only way this department can do its work fully and efficiently is to know everything that is going on along public-health lines in the State.



The bill should certainly not pass with this provision. This department has always worked very closely with the United States Public Health Service, and we often seek their aid, so that it does not seem possible that the bill originated from the Public Health Service.

Sincerely yours,

STANLEY H. OSBORN, *Commissioner.*

Dr. PARRAN. Mr. Chairman, I would like to have inserted in the record at this point a letter received from Dr. I. C. Riggins, president of the Association of State and Territorial Health Officers.

Mr. BULWINKLE. That will be done.

THE ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICERS,  
*Richmond, Va., March 1, 1944.*

Dr. THOMAS PARRAN,  
*Surgeon General, United States Public Health Service,  
Washington, D. C.*

DEAR DOCTOR PARRAN: Very careful consideration and study have been given to H. R. 3379, codification of public-health laws, by the executive committee of the Association of State and Territorial Health Officers, and two minor changes in this legislation have been suggested. These two changes are:

Section 214 (b). Delete "or political subdivision thereof."

Section 314 (h). Insert after word "consultation", "and agreement."

With these changes the Association of State and Territorial Health Officers is in accord and trust that H. R. 3379 will be enacted into legislation. The Association of State and Territorial Health Officers believes that the codification of the public health laws as proposed in H. R. 3379 is a forward step and is legislation that has been needed for some time. It is hoped that the Congress will act favorably on this proposed legislation.

May I say that the Association of State and Territorial Health Officers feels that this legislation is very important, and if the association can be of any assistance to the Public Health Service in this matter, we shall be glad if you will let us know.

Sincerely yours,

I. C. RIGGINS,  
*President, Association of State and Territorial Health Officers.*

# STATEMENT OF CHESTER D. SWOPE, D. O., CHAIRMAN, DEPARTMENT OF PUBLIC RELATIONS, AMERICAN OSTEOPATHIC ASSOCIATION, WASHINGTON, D. C.

Mr. BULWINKLE. Dr. Swope, if it is agreeable with you, we will hear you at this time.

Dr. SWOPE. Mr. Chairman, I am Chester D. Swope, D. O., chairman, department of public relations, American Osteopathic Association, Washington, D. C.

I am engaged in practice as an osteopathic physician and surgeon in the District of Columbia, and am a member of the District of Columbia Board of Examiners in Medicine and Osteopathy. It is my privilege to appear here as chairman of the department of public relations of the American Osteopathic Association.

May I say at the outset that we appreciate your invitation to be here and present our views on this bill, H. R. 3379. With your permission, Dr. Otterbein Dressler, of the Philadelphia College of Osteopathy, will follow me with a brief statement.

The American Osteopathic Association and the osteopathic profession have a direct interest and responsibility in fostering the public health and we have every desire to cooperate with, and to take our place in fostering the work of, the Public Health Service. We certainly approve the policy of codifying all the laws on this subject be-

cause we believe that easy accessibility and simplification of law are definite factors in bringing about a wider interest and understanding, and anything which makes it easier to deal with a Government bureau ought to be encouraged.

I should first like to comment on subsection (c) of section 215, on page 18, which reads as follows:

No regulation relating to qualifications for appointment of medical officers or employees shall give preference to any school of medicine.

The position of that provision leaves no doubt that it applies to commissioned officers, Regular and Reserve, as well as noncommissioned officers and employees. Furthermore, there can be no doubt that, taken in combination with the last sentence of section 4 of Public Law 184 of the Seventy-eighth Congress, which is the provision specifically declaring osteopathic graduates eligible for Public Health Service Reserve appointments, it is applicable to candidates from the osteopathic as well as other schools of medicine. The provision of Public Law 184, which I refer to, reads as follows:

For the duration of the present war and for six months thereafter graduates of reputable osteopathic colleges shall be eligible for appointment as Reserve officers in the Public Health Service.

This bill, H. R. 3379, antedates Public Law 184 and, therefore, it does not contain the osteopathic provision. At this point I am reminded of your statement at the outset of these hearings, Mr. Chairman, in which you indicated that the provisions of Public Law 184, so recently enacted by Congress, I believe it was approved on November 11, 1943, should be integrated into the present bill. We assume that would apply to the osteopathic provision and we are here to urge its incorporation at the proper place in the code.

I should like to say that we have been given to understand by the Public Health Service that regulations have been drawn implementing osteopathic appointments under this provision such appointments will be made as soon as the regulations have obtained legal clearance and Presidential approval, all of which are expected at an early date.

There have been other occasions where Congress has enacted laws specifically recognizing and exacting of osteopathic graduates an equivalent standard of training as in the case of medical graduates. An example is the 1929 law regulating the healing art in the District of Columbia, Public Law 831, Seventieth Congress. In that law Congress set up a board in medicine and osteopathy to examine into the qualifications of medical and osteopathic graduates for license to practice. Applicants are required to have 2 years' college pre-professional training, 4 years' professional training, and 1 year's internship in reputable medical or osteopathic institutions.

The District of Columbia law requires that the same examination be given to all candidates except that homeopathic candidates are to be examined in homeopathic medicine by the homeopathic member of the board and osteopathic candidates are to be examined in osteopathic medicine by the osteopathic member. In all other respects and in all other subjects all candidates stand the same examination. In addition, the law states, I quote:

The degrees doctor of medicine and doctor of osteopathy shall be accorded the same rights and privileges under governmental regulations.

There are six schools of osteopathy which are fully approved and recognized by the Bureau of Professional Education and Colleges of the American Osteopathic Association, after annual reports and inspections by qualified personnel.

The student body in these six colleges is about 1,600, and the institutions graduate approximately 400 annually. All of these colleges require 2 years' preprofessional college work before matriculation in the professional college. The professional course is 4 years; however, these colleges are on an accelerated basis such as is the case in most colleges due to wartime needs. There has been no reduction in the number of hours of instruction required in any of these colleges. It is simply that the calendar time has been reduced due to the elimination of summer vacations. All colleges maintain teaching hospitals where all forms of medical and major surgical cases are hospitalized.

In addition there are some 30-odd osteopathic hospitals which are approved for intern-training purposes. In these hospitals osteopathic graduates receive their additional year's professional training, making in normal times 7 years' professional training after high school. All States have enacted laws for examining, licensing, and registering physicians of the osteopathic school. Some States have osteopathic boards, others have composite boards, others have all medical boards. In a number of States, notably Colorado, Delaware, District of Columbia, Kentucky, Massachusetts, New Hampshire, New Jersey, Ohio, and Texas, osteopathic applicants for State license are required to take the same examination as graduates of medical schools and before the same State board of examiners, after which they receive identical or equivalent licenses to practice.

These State examinations run the entire gamut of the healing art. An example of how osteopathic candidates measure up in these examinations is provided in a report of the New Jersey medical board for 1940, carried on page 1402 of the April 6, 1940, issue of the American Medical Association Journal. An inspection of the report will indicate that the osteopathic applicants were among those making the highest grades. The successful applicants at that examination were granted a State license to practice medicine and surgery.

Further, with respect to New Jersey, may I say that the State makes its own examinations of professional schools and has examined and approved osteopathic colleges as institutions possessing the training facilities and other requirements necessary to equip a qualified practitioner of the healing art in all its branches. The board of regents of New York University is the certifying agency for New York State, and that board also has inspected and certified osteopathic institutions as qualified training institutions.

I hope I have given you information which will help you in assessing the merit of our contention that the provision for appointment of osteopathic graduates be incorporated in this bill.

Dr. Dressler is connected with one of our training institutions and will, if you please, Mr. Chairman, at this time give you a brief account of the professional training provided there. We will remain available for any questions or requests for any additional data you may deem necessary.

Thank you very much.



Mr. BULWINKLE. I think your statement should contain a definition of what osteopathy is, if you will leave that.

Dr. SWOPE. Yes, sir.

Mr. REECE. I think that is a good idea.

(The matter referred to is as follows:)

Osteopathy is the school of medicine or the art and science of prevention, diagnosis, and treatment of disease and injury which majors in manipulation and includes surgery and the other branches (specialties) of the healing arts.

The osteopathic practitioner, according to the Dictionary of Occupational Titles (revised), diagnoses, prescribes for, and treats diseases, disorders, and conditions of the human body in accordance with the scope of regulatory laws in all the States; majors in manipulative procedures for the detection and correction of disorders and affections of the bones, muscles, nerves, blood vessels, and other tissues of the body structure; employs auxiliary medical appliances, devices, and other aids to diagnose and to support, immobilize, or otherwise adjust bodily impairments and, as legally qualified in varying degree in most States, practices obstetrics, surgery, internal medicine, or other branches (specialties) of medical science.

Mr. PRIEST. Mr. Chairman, may I ask one question?

Mr. BULWINKLE. Mr. Priest.

Mr. PRIEST. Approximately how many States require a similar examination by a board for license to practice osteopathy as they require for other medical-profession applicants.

Dr. SWOPE. Of course, all States have a law. That is, the practice is regulated in every State. I wonder if this would answer. In all but 5 States, for instance, they are licensed to practice obstetrics, and I think it is in excess of 30 that they are licensed to practice major surgery; minor surgery in most of the remaining States.

Mr. PRIEST. Major surgery in how many States?

Dr. SWOPE. I can give that to you specifically, and I would rather do that than make an off-hand statement.

Mr. PRIEST. That is all right.

Dr. SWOPE. But it is in a great majority of them.

Mr. PRIEST. That is all.

(The information requested is as follows:)

Since most subjects of instruction in the healing art are common to both medical and osteopathic colleges, and there are licensing boards in all States whose duty it is to test the professional education of medical or osteopathic candidates, the practical effect is that all States contemplate a substantially "similar" examination for medical or osteopathic licensure.

In eight States and the District of Columbia (Colorado, Delaware, District of Columbia, Kentucky, Massachusetts, New Hampshire, New Jersey, Ohio, and Texas), osteopathic and medical candidates take the same examination before the same examining board and receive identical or equivalent licenses to practice. In the remaining States the examining and licensing boards are osteopathic, medical, or mixed, and grant limited or unlimited licenses as the case may be. In 30 States, the District of Columbia, and Hawaii, osteopathic candidates are licensed to practice major surgery (Arizona, California, Colorado, Delaware, District of Columbia, Florida, Georgia, Hawaii, Indiana, Iowa, Kentucky, Maine, Massachusetts, Michigan, Missouri, Nevada, New Hampshire, New Jersey, New Mexico, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, Tennessee, Texas, Utah, Virginia, Washington, West Virginia, Wisconsin, Wyoming). In most of the remaining jurisdictions, osteopathic candidates may resort to minor surgery on proper occasions. Minor surgery may be said to be the surgery usual to the office practice of a general practitioner.

All States require graduation from a professional osteopathic college. Every State requires high-school graduation and college work as a prerequisite for entrance to the professional osteopathic college; while this requirement is not specifically mentioned in some States, it is implied by the fact that students must graduate from approved osteopathic colleges, and these colleges require high-school graduation and at least 2 years of college work for entrance.



Mr. REECE. Mr. Chairman.

Mr. BULWINKLE. Mr. Reece.

Mr. REECE. What part of this did you have in mind should go into the record? [Indicating Guidance Leaflet on Osteopathy by the U. S. Office of Education.]

Mr. BULWINKLE. That definition.

Mr. REECE. The definition.

Mr. BULWINKLE. Yes.

Mr. REECE. Is this definition as prepared by someone in the Bureau of Education and is it quoted verbatim—

Dr. SWOPE. It is quoted verbatim. Its original source is a revised definition in the dictionary of Occupational Titles, Employment Service, Federal Security Agency.

Mr. REECE. This seems to be a leaflet that is gotten out by the American Osteopathic Association; but down underneath, towards the bottom of the cover page, it says "As issued by Federal Security Agency, U. S. Office of Education," and so forth, "For sale by the Superintendent of Documents, Washington, D. C."

Dr. SWOPE. That is right. The pamphlet is prepared by the United States Bureau of Education. We have been given the privilege of reproducing it. That is why this copy states that it is a reprint.

Mr. REECE. Then in order to get it clear, this is all reproduced from some leaflet that is gotten out—

Dr. SWOPE. That is gotten out by the Federal Security Agency.

Mr. REECE. By the United States Office of Education.

Dr. SWOPE. Yes, sir; but as the text shows the definition of osteopathy is taken from a revision of the Dictionary of Occupational Titles. We have reprinted the Government document without change.

Mr. REECE. That is what I wanted to get fixed in my mind, where it originated.

Dr. SWOPE. That is right.

Mr. BULWINKLE. We thank you very much, doctor.

Dr. SWOPE. Thank you.

#### STATEMENT OF LT. LEONARD J. CALHOUN, UNITED STATES NAVAL RESERVE

Lieutenant CALHOUN. Mr. Chairman, my name is Leonard J. Calhoun, lieutenant, United States Naval Reserve.

Mr. Chairman, I appreciate the opportunity—

Mr. BULWINKLE. I think that you should state what position you held before going into the Navy.

Lieutenant CALHOUN. I was formerly, Mr. Chairman, assistant general counsel of the Federal Security Agency in charge of legislation and litigation.

I appreciate the opportunity—

Mr. BULWINKLE. Just a minute. I want to ask you another question. What did you have to do with the drafting of this legislation, if anything?

Lieutenant CALHOUN. I participated in the early stages of the legislation, Mr. Chairman, up until about October of last year, when I went with the Navy.

Mr. BULWINKLE. Up to that time—the bill was introduced before that time?

Lieutenant CALHOUN. Yes, sir; but some of the very last work that was done before the introduction of the bill, was done after I had transferred, as I remember. It was practically completed.

Mr. BULWINKLE. All right.

Lieutenant CALHOUN. I appreciate the opportunity of making a statement as to H. R. 3379, a bill to codify the laws relating to the Public Health Service, and for other purposes.

As is the case with most worth-while proposals, H. R. 3379 represents the cooperative effort of many persons. As I remember, Mr. Chairman, you suggested the codification some months ago when a proposed public health bill was being reviewed by you. That bill, like a multitude of other public health bills before it—and a great many statutes which have been heretofore passed—proposed to change the law without amending or repealing any existing statutes, and indeed, without any one of us being able to say with precision exactly what existing laws were being changed.

Enactment of H. R. 3379 would do two very important things in clearing up the existing uncertainty as to just what are the Public Health Service laws. First, it would set out in one act practically all of the statutes affecting the Public Health Service; and, second, it would repeal an enormous number of statutes, relating to the public health.

Section 609 of the bill, which extends from page 75 through page 88 is one of the most important sections in the proposed legislation. This section repeals a vast number of provisions relating to the Public Health Service. Review of the section indicates that many of these provisions are merely sentences in appropriation acts or are found in statutes which only incidentally refer to the Public Health Service. The existence of many of these provisions has been of considerable embarrassment in interpreting the Public Health Service laws. Some have been obviously superseded by later enactments. The effect of later enactments on others is extremely problematical. Many of these provisions were affected by the provisions of the reorganization plan, transferring the Public Health Service from the Treasury Department to the Federal Security Agency. The extent to which they were modified or superseded frequently has presented a very perplexing problem.

It might be said of the Public Health Service laws, in general, that there has been a very large number of overlapping statutes. Broad authority in one piece of legislation has been frequently followed by legislation in the same general field giving a narrower authority. There are instances where several acts cover the same subject matter under very different language. Unquestionably, enactment of the Public Health Service Code would minimize difficulties such as I have mentioned which have been increasingly evident in the last few years and consequently which have been increasingly in need of clarification.

The Committee on Interstate and Foreign Commerce is performing a most valuable service in revising as a whole the body of Public Health Service laws and in spending the time necessary to clarify and improve this code of law. As the committee is aware, the existing provisions contain many gaps and there are many inconsistencies among these provisions. This is not to be wondered at, in view of the practice which has persisted through almost a century and a half of enacting Public Health Service legislation designed to cope with special situations and without review of the existing statutes bearing

on the same subject matter. I feel that the committee is due a debt of gratitude for devoting its time and attention in considering his bill, which would rectify in some hundred pages the errors which have accumulated in the last century and a half.

I understand that during the course of your hearings on this bill, many improvements have been suggested by witnesses who have appeared before your committee. I know that very great improvements have been made on the existing law during the several months since I have been no longer connected with the Federal Security Agency, as suggestions have come in from various sources. Before and since that time there have been very careful study made by Dr. Parran, Dr. Thompson, Dr. Draper, Dr. Stewart and others of the Public Health Service staff and of Miss Mary Switzer, and Mr. Willcox of the Federal Security Agency; Mr. Perley, of the House Legislative Counsel's office, as well as Lieutenant Drexler of the Coast Guard. No doubt that with the further review and improvements which your committee will make, there will be a resulting Public Health Service Code in which we may all take justifiable pride.

I do not have any suggestions to your committee which I believe would be of value with respect to making changes in the proposed legislation; but before concluding, I should like to mention briefly something about the procedure which was followed in attempting the codification.

From the indexes of the United States Code, Annotated, the Revised Statutes and the Statutes at Large, an effort was made to find all of the existing provisions of law relating to the Public Health Service. All of these provisions found in the Revised Statutes and in the Statutes at Large were photostated. As I remember, the result was some four or five hundred pages of photostats. The next step was to classify these various provisions by subject matter. A very tentative draft was made as to what we considered to be existing law in each of the divisions of subject matter.

The Surgeon General then arranged for a series of conferences which extended over a period of weeks and the various subjects of the proposed bill were discussed by the members of his staff most familiar with the particular subject matter. The Surgeon General and Dr. Thompson, Dr. Draper, or Dr. Stewart were present at all of these conferences, and consequently, they were integrated and a consistent over-all approach was made as to the proposed codification.

As you have no doubt been previously advised, by witnesses and by your own review of the proposed code, there are in some instances a conscious departure from existing statutory provisions, though in most cases the changes in statutory language which were made were made for purposes of clarification and of reaching the consistency with other provisions in the code. It was felt that, to the extent possible, Congress should specifically review and validate some of the more important regulations which had been issued by the Public Health Service pursuant to broad grants of statutory authority and where the Congress deemed it advisable that these should be modified. Accordingly you will find in the code a statutory provision of what has heretofore been only in regulations.

In conclusion, since I am speaking in an entirely unofficial capacity, I should like to pay a special tribute to the patient work of the committee, and to Dr. Parran and to members of the staff of the Public



Health Service, and to the people in the Public Health Service in the States, all of whom have given so much care and thought to the preparation of this code. Especially, Mr. Chairman, I should like to express appreciation to you in suggesting the code and for the extended and helpful advice you have given as to its preparation. I know I am joined in this by Mr. Perley, Mr. Willcox, and the others who have participated.

Mr. BULWINKLE. Who are those ladies down there who helped with it?

Lieutenant CALHOUN. I think Mrs. Willcox should have particular tribute paid to her and there have been very helpful comments made by some of the administrative people in the Federal Security Agency and in other agencies, not directly connected with the Public Health Service.

It is my hope and belief that this code will be enacted. It would be a landmark in the legislative history of the Public Health Service and it would certainly prove a most useful guide in future legislation, because it would fix in one place in existing law, in an orderly manner, and permit an orderly modification of that existing law with the precision which has not been heretofore possible, and most important it will provide a degree of certainty which has heretofore been seriously lacking in many important details.

Accordingly, the work which this committee has been doing and is still doing, I believe will be of lasting importance and significance.

Mr. BULWINKLE. Any questions?

Mr. REECE. How long were you with the Federal Security Agency?

Lieutenant CALHOUN. I was with the Federal Security Agency, sir, since the time it was formed. Prior to that I was with the Social Security Board, but it was integrated in the Federal Security Agency under the Reorganization Act.

Mr. REECE. When did you begin to give your attention to the public health laws?

Lieutenant CALHOUN. So far as this particular code is concerned, I think it was about 8 or 9 months ago, Mr. Bulwinkle.

Mr. BULWINKLE. I think it started in January.

Lieutenant CALHOUN. January a year ago.

Mr. BULWINKLE. Yes.

Lieutenant CALHOUN. I believe that is correct.

Mr. REECE. You are satisfied that all of the statutes relating to the Public Health were found and have been considered in connection with the getting up of this bill?

Lieutenant CALHOUN. I would not guarantee it, sir; but I think that the procedure we followed resulted in us having before us everyone that any index that we knew anything about referred to. The Statutes at Large are particularly well indexed, and in going through each one of them, we picked up a great many bits of law that we did not even know existed, before we did it.

Mr. REECE. I am not thoroughly familiar with the procedure, but the legislative provisions which are attached to appropriation bills, are they indexed in such a way so that after a lapse of years they can be located?

Lieutenant CALHOUN. They can be fairly well located in the indexes in the Statutes at Large. You see those bills are set out at length and are fairly well indexed in there by subject matters.



Mr. REECE. That is all.

Mr. BULWINKLE. Mr. Priest.

Mr. PRIEST. I have no questions.

Mr. BULWINKLE. Lieutenant, we thank you very much, sir, for what you have done and appreciate very much and thank you for coming up.

Lieutenant CALHOUN. Thank you.

**STATEMENT OF DR. OTTERBEIN DRESSLER, D. O., OF THE PHILADELPHIA COLLEGE OF OSTEOPATHY, PHILADELPHIA, PA.**

Mr. BULWINKLE. Now, Dr. Dressler, we will be glad to hear you.

Dr. DRESSLER. My name is Otterbein Dressler, D. O., of the Philadelphia College of Osteopathy, Philadelphia, Pa.

I am professor of pathology, at the Philadelphia College of Osteopathy, and director of laboratories of the Osteopathic Hospital of Philadelphia. Because of the proximity of the Philadelphia College to Washington and since it is representative of the approved institutions of osteopathy, I was invited by the chairman of the department of public relations of the American Osteopathic Association to present to you a concise picture of the training facilities of our Philadelphia college and hospital so that you might know the type of physician and surgeon that goes out from the institution to assume his place, mayhap in the commissioned Medical Corps of the 'Public Health Service.

The Philadelphia college and hospital are located at Forty-eighth and Spruce Streets in Philadelphia and represent an investment of more than \$1,000,000. They contain completely equipped departments for clinical instruction in neurology, major surgery, gynecology, genitourinary and venereal diseases, eye, ear, nose and throat diseases, pediatrics, X-ray, physiotherapy, chemistry, toxicology, bacteriology, and my own department of pathology. The hospital is approved as an intern-training institution by the Pennsylvania State Board of Surgery, which consists of two doctors of medicine and two osteopathic physicians and surgeons. Our graduates are admissible to take osteopathic or medical, as the case may be, examinations in all the States.

In order to matriculate in the Philadelphia college a student must present credentials showing at least 2 years college training—of course, before the war we encouraged them to take degrees but now just 2 years—in a recognized liberal arts college, showing a specified number of hours training in chemistry (inorganic and organic), physics, biology, and English, and recommended subjects of anatomy, bacteriology, physiology, and modern languages. The collegiate credits in physics, chemistry, and biology must conform to the requirements of the credentials bureau of the Pennsylvania Department of Public Instruction and the New York Board of Regents.

In addition, the general character and aptitudes of the student are given consideration in determining his eligibility. Once enrolled he starts in a professional course of 36 months leading to a degree of doctor of osteopathy. The first 2 years in the professional college cover the fundamental sciences, including anatomy, physiology, bacteriology, and so forth. A major portion of the time is spent in practical work in the laboratories. The time of the second year is given over largely to advanced study of the subjects of the first year, particularly pre-

ventive medicine and bacteriology, pathology, pharmacology, and physical diagnosis. The last 2 years include the clinical or hospital studies, osteopathic medicine, therapeutics, surgery, obstetrics, and the specialties. With a foundation laid in the fundamental and osteopathic medical sciences, the student works under supervision in the dispensary, wards, and laboratories of the hospital. Senior students extern in the hospital. The entire work of the hospital is so organized that practically all cases entering are considered as potential teaching cases for students of the college. The hours of instruction in this institution parallel the requirements of both the American Osteopathic Association and the American Medical Association.

I have here a compilation of the relative curricula of all of the osteopathic schools and also Harvard Medical School, University of Kansas and Stanford University, which I would like to submit for inclusion at this point, if you please.

Mr. BULWINKLE. All right, sir.

(The compilation referred to is as follows:)

[From the October 1942 Journal of the American Osteopathic Association] \*

|                                                     | Recommendations of American Osteopathic Association and American Medical Association |          | Chicago College of Osteopathy<br>*Amended |          | Des Moines-Still College of Osteopathy |          | Los Angeles College of Osteopathic Physicians and Surgeons |          | Kansas City College of Osteopathy and Surgery |          |
|-----------------------------------------------------|--------------------------------------------------------------------------------------|----------|-------------------------------------------|----------|----------------------------------------|----------|------------------------------------------------------------|----------|-----------------------------------------------|----------|
|                                                     | Hours                                                                                | Per cent | Hours                                     | Per cent | Hours                                  | Per cent | Hours                                                      | Per cent | Hours                                         | Per cent |
| 1. Anatomy, including embryology and histology..... | 814                                                                                  | 18.5     | 804                                       | 16.8     | 1,024                                  | 21.0     | 715                                                        | 14.0     | 816                                           | 18.7     |
| 2. Physiology.....                                  | 264                                                                                  | 6.0      | 306                                       | 6.4      | 432                                    | 9.0      | 231                                                        | 4.5      | 252                                           | 5.8      |
| 3. Biochemistry.....                                | 198                                                                                  | 4.5      | 192                                       | 4.0      | 162                                    | 3.5      | 209                                                        | 4.0      | 168                                           | 3.8      |
| 4. Pathology, bacteriology, and immunology.....     | 572                                                                                  | 13.0     | 546                                       | 11.4     | 770                                    | 16.0     | 562                                                        | 11.0     | 504                                           | 12.5     |
| 5. Pharmacology.....                                | 220                                                                                  | 5.0      | 156                                       | 3.2      | 168                                    | 3.5      | 198                                                        | 4.0      | 192                                           | 4.4      |
| 6. Hygiene and sanitation.....                      | 176                                                                                  | 4.0      | 192                                       | 4.0      | 60                                     | 1.2      | 168                                                        | 3.3      | 126                                           | 2.9      |
| 7. General medicine.....                            | 1,166                                                                                | 26.5     | 1,547                                     | 32.4     | 1,290                                  | 26.6     | 1,573                                                      | 31.0     | 1,320                                         | 30.0     |
| 8. General surgery.....                             | 770                                                                                  | 17.5     | 706                                       | 14.7     | 474                                    | 10.0     | 986                                                        | 19.0     | 606                                           | 14.0     |
| 9. Obstetrics and gynecology.....                   | 220                                                                                  | 5.0      | 323                                       | 6.7      | 464                                    | 10.0     | 437                                                        | 8.5      | 378                                           | 8.6      |
| Total.....                                          | 4,400                                                                                | 100.0    | 4,772                                     | 100.0    | 4,844                                  | 100.0    | 5,079                                                      | 100.0    | 4,362                                         | 100.0    |

|                                                     | Kirkville College of Osteopathy and Surgery |          | Philadelphia College of Osteopathy |          | Harvard Medical School |          | University of Kansas Medical School |          | Stanford University School of Medicine |          |
|-----------------------------------------------------|---------------------------------------------|----------|------------------------------------|----------|------------------------|----------|-------------------------------------|----------|----------------------------------------|----------|
|                                                     | Hours                                       | Per cent | Hours                              | Per cent | Hours                  | Per cent | Hours                               | Per cent | Hours                                  | Per cent |
| 1. Anatomy, including embryology and histology..... | 1,024                                       | 24.0     | 872                                | 20.0     | 440                    | 10.3     | 768                                 | 17.0     | 754                                    | 17.4     |
| 2. Physiology.....                                  | 288                                         | 6.7      | 392                                | 9.0      | 232                    | 5.4      | 320                                 | 7.1      | 269                                    | 6.2      |
| 3. Biochemistry.....                                | 126                                         | 3.0      | 280                                | 6.3      | 232                    | 5.4      | 224                                 | 5.0      | 176                                    | 4.1      |
| 4. Pathology, bacteriology, and immunology.....     | 558                                         | 13.0     | 734                                | 7.0      | 479                    | 11.0     | 614                                 | 13.7     | 477                                    | 11.0     |
| 5. Pharmacology.....                                | 108                                         | 2.5      | 80                                 | 1.8      | 129                    | 3.0      | 209                                 | 4.7      | 200                                    | 4.6      |
| 6. Hygiene and sanitation.....                      | 90                                          | 2.0      | 64                                 | 1.5      | 124                    | 3.0      | 62                                  | 1.4      | 124                                    | 3.0      |
| 7. General medicine.....                            | 1,242                                       | 30.0     | 1,070                              | 24.0     | 1,219                  | 28.5     | 1,301                               | 29.0     | 1,123                                  | 25.9     |
| 8. General surgery.....                             | 486                                         | 11.3     | 700                                | 16.0     | 705                    | 16.4     | 689                                 | 15.4     | 698                                    | 16.2     |
| 9. Obstetrics and gynecology.....                   | 252                                         | 6.0      | 208                                | 4.7      | 317                    | 4.7      | 269                                 | 6.0      | 303                                    | 7.0      |
| Total.....                                          | 4,274                                       | 100.0    | 4,400                              | 100.0    | 4,271                  | 100.0    | 4,484                               | 100.0    | 4,324                                  | 100.0    |

Dr. DRESSLER. The public-health subject of immunology is projected in didactic and laboratory methods. The principles of infection and defense mechanism are emphasized. The values and shortcomings of the known biologicals are explored. Clinical instruction in the use of the biologicals is given.

At this point I should like to submit for inclusion without reading, this table of how we go about teaching the use of antitoxins and vaccines, and so forth.

Mr. BULWINKLE. Very well.

(The statement requested is as follows:)

Passive immunization:

1. Antisera—effects and type of diseases used in.
2. Antitoxins:
  - (a) Prophylactic and therapeutic use.
  - (b) Standardization.
  - (c) Unit definition.
  - (d) Dosage.
  - (e) Specific use.
3. Antivenoms—administration of.
4. Convalescent serum:
  - (a) Principles involved.
  - (b) Diseases used in.
  - (c) Donors.

Active immunization:

1. Bacterins—serobacterins—filtrates:
  - (a) Principles and mechanisms involved.
  - (b) Diseases used in.
  - (c) Donors.
2. Virus:
  - (a) Specific use.
3. Nonspecific proteins:
  - (a) Toxoids:
    1. Prophylactic value.
    2. Dosage.
    3. Sensitivity test.
  - (b) Whole blood:
    1. Principles—dosage—administration.
  - (c) Placentalglobulin:
    1. Prophylactic and therapeutic use.
  - (d) Serum sickness:
    1. Precaution of serum administration.
      - (a) Skin and ocular tests.
      - (b) Proper administration of serum.
      - (c) Desensitizing technic.
  - (e) Diagnostic tests:
    1. Pneumococci typing.
    2. Agglutination tests.
    3. Precipitin tests.
    4. Complement fixation—Wassermann.
    5. Flocculation tests—Kahn, etc.
    6. Skin tests—Brucellin, Frei, Tuberculin, etc.
  - (f) Susceptibility tests:
    1. Schick.
    2. Dick.

Allergy:

- Theories and principles.  
 Skin tests:  
 Patch test.  
 Cutaneous.  
 Intradermal.

Dr. DRESSLER. With regard to tropical diseases, these are considered in the course on public health. Hygiene and sanitation are like-



wise studied and emphasized. These subjects are particularly stressed because of the role played by the general practitioner in public health activities and in his capacity as a public health officer. Incidentally, osteopathic physicians are serving on State boards of health in the States of California, Colorado, and Kentucky, and there are a number of osteopathic physicians who are serving as county, city, and town health officers and physicians. Under the subject of preventive medicine are presented the following:

Here I should like to have inserted this list of subjects included in our treatment of preventive medicine.

Mr. BULWINKLE. All right, sir.

(The list of subjects above referred to is as follows:)

1. Communicable diseases:
  - (a) Specific and general measures of prevention.
2. Insect transmitted diseases.
3. Lower animal transmission diseases.
4. Immunity—heredity—eugenics.
5. Public health measures:
  - (a) Housing.
  - (b) Rural sanitation.
  - (c) Public health education.
  - (d) Water and its relation to disease:
    - (1) Purification.
    - (2) Analysis.
  - (e) Sanitation of swimming pools.
  - (f) Vital statistics.
6. Sewage:
  - (a) Management—treatment—disposal.
7. Foods:
  - (a) Food poisoning.
  - (b) Food infections.
  - (c) Deficiency diseases.
  - (d) Adulteration.
- Milk:
  - (a) Grading.
  - (b) Pasteurization.
  - (c) Inspection.
8. Ventilation and heating.
9. Industrial hygiene and occupational diseases.
10. School sanitation.
11. Maternal morbidity and mortality.

Dr. DRESSLER. Further with respect to our hospital, I should like to say that since 1919 a school of nursing has been maintained. That school of nursing is accredited by the Board of Registration of Nurses in Pennsylvania and it is listed in the list of schools of nursing by the National League of Nursing Education. Its graduates are serving in the Nurses' Corps of the Army and Navy. Our school of nursing is approved by the Public Health Service for nurses' training and a nurses cadet corps is now in operation there.

Our hospital is an official casualty receiving station under the civilian defense set-up of Philadelphia. It is an authorized Emergency Medical Service depot. It has organized two medical field units which are manned, of course, by osteopathic surgeons. I happen to be a member of the Emergency Medical Service.

Mr. Chairman, I hope this information will be found helpful to the members of the committee. We are grateful to you for this privilege of being heard.

Mr. REECE. If I may revert to the first insert, in the first column is captioned "Recommendations of American Osteopathic Associa-



tion, and American Medical Association." I understand from that that the recommendations for courses of study in the medical colleges is the same by the Osteopathic and the American Medical Association.

Dr. DRESSLER. I would interpret that the same way; yes, sir.

Mr. PRIEST. Their number of hours of instruction in the various subjects are parallel?

Dr. DRESSLER. That is how I would interpret that tabulation; yes. Each association has its professional bureau and its bureau of colleges that acts upon those things, I believe.

Mr. BULWINKLE. Doctor, I would like to ask you a question: Admitting, for the sake of argument, that the standards required in your college at Philadelphia are very high, how do these standards compare with the other osteopathic schools in the United States?

Dr. DRESSLER. The other colleges?

Mr. BULWINKLE. The other colleges.

Dr. DRESSLER. The bureau of colleges in the American Osteopathic Association has certain set standards for osteopathic education and all of the recognized colleges of osteopathy in this Nation meet those standards.

Mr. BULWINKLE. Now, the question was asked here a few minutes ago by Mr. Priest—what was that question, Mr. Priest?

Mr. PRIEST. Yes, I asked a question there in an attempt to get information on the licensing of osteopathic physicians in the various States. The question was approximately, In how many States are the requirements for license similar or the same as the requirements for license for physicians, before a licensing board?

Dr. DRESSLER. I am very, very much embarrassed, because I did not anticipate a question of that variety, and I am not prepared in the subject of legal medicine. However, I do hold a chair and know something about the education of the doctor.

That information can be put in your hands without any difficulty, I am sure.

(See information inserted in Dr. Swope's testimony.)

Mr. PRIEST. If I may ask one other question there, to pursue a question I asked a few minutes ago, with reference to major surgery: Do graduates of all of these six institutions which you have listed here meet the qualifications insofar as training is concerned to practice major surgery; in your opinion, do they meet those requirements?

Dr. DRESSLER. Legal requirements?

Mr. PRIEST. Yes.

Dr. DRESSLER. Yes; now, there are some States—for instance, the State of Pennsylvania—where we have a special surgical examining board which requires certification of postgraduate study. Of course, that would be an exception. The State of Florida—I am licensed to practice in Florida. operative surgery; evidently qualified by law, despite the fact that my specialty is pathology—I rarely work on the living body.

Mr. REECE. I was trying to elicit some information a while ago which would enable me to distinguish between homeopathic and osteopathic physicians. Could you give any further enlightenment on it?

Dr. DRESSLER. I think this, that the information that you have elicited from Dr. Swope (which discussion was off the record) is very much to the point.

I am totally unqualified to testify to the precepts of the Homeopathic School of Medicine. I can testify somewhat to the precepts of the Osteopathic School of Medicine. However, it is my impression that, as in the various schools of theology, all of us have the same objective. We may perhaps pursue a different course to attain that objective.

Mr. REECE. I rather drew the conclusion from what Dr. Thompson said that probably the homeopathic was coming to be an extinct species as an independent type of practitioner. Anyway, I will not pursue that any further.

Mr. BULWINKLE. Any further questions?

Mr. PRIEST. There was one question I made a little note on. Oh, yes; I believe it was on page 4 of your prepared statement. You made reference to instructions in tropical diseases and hygiene, and sanitation, and other subjects, and emphasized that these subjects were stressed in connection with the role they would play in public health and in the public-health courses.

Are there special courses in public health given in your college; for example, do you have a course in public health or special instruction relating to public health?

Dr. DRESSLER. Yes.

Mr. PRIEST. Is that true also of the other five recognized institutions or institutions certified by the American Osteopathic Association? I fail to find that.

Dr. DRESSLER. They do not necessarily title it as such, but it usually is comprehended under the subject of hygiene and sanitation.

Mr. PRIEST. That is all, Mr. Chairman.

Mr. BULWINKLE. We thank you, sir.

Dr. DRESSLER. Thank you.

Mr. BULWINKLE. That exhausts our list of witnesses for today and the committee will stand adjourned until Tuesday morning at 10 o'clock.

(Thereupon, at 11 a. m., the subcommittee adjourned to meet Tuesday, March 14, 1944, at 10 a. m.)

## PUBLIC HEALTH SERVICE CODE

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TUESDAY, MARCH 14, 1944

HOUSE OF REPRESENTATIVES,  
SUBCOMMITTEE OF THE COMMITTEE ON  
INTERSTATE AND FOREIGN COMMERCE,  
*Washington, D. C.*

The subcommittee met at 10 a. m., pursuant to adjournment, in room 1536, New House Office Building, Hon. Alfred L. Bulwinkle presiding.

Mr. BULWINKLE. The committee will come to order. We will hear Rear Admiral Luther Sheldon, Assistant Chief of Bureau of Medicine and Surgery, of the Navy.

### STATEMENT OF REAR ADMIRAL LUTHER SHELDON, ASSISTANT CHIEF OF BUREAU OF MEDICINE AND SURGERY, UNITED STATES NAVY

Admiral SHELDON. Mr. Chairman, I have not had the opportunity of studying this bill and was informed that the part that would be of interest to the Navy was in connection with the hospitalization of dependents and that is all I have come up prepared to talk about.

Mr. BULWINKLE. What section is that, doctor?

Dr. PARRAN. Page 35, section 326 (b).

Mr. BULWINKLE. Very well, sir.

Admiral SHELDON. In 1935 the Navy began to care for dependents of its service personnel, both officers and enlisted men, based upon authority given by the Secretary of the Navy to establish beds in certain naval hospitals, wards, or buildings for that purpose. No action of Congress was required to put that into operation, because the Army, since 1880, had had the same rights and our laws were so worded that the Navy personnel should have the same rights and privileges, of course, as the Army.

On the strength of that, we established this in seven or eight naval hospitals.

We found that it was such a booster for the morale of the service people to know that they had such facilities available for their families when they were away, that we wanted to extend it. In order to do that, we had to ask for legislation and appropriation to get funds to add to some of our existing hospitals. That was granted and in May of 1943, a bill was passed authorizing the care of dependents in naval hospitals and stating who composed dependents. They are the dependent children of service personnel, mother or father, if that mother or father is actually dependent; and widows of service personnel.



Then, that was extended to include the Coast Guard during time of war, since the Coast Guard becomes an integral part of the Navy at that time, so that now we are caring for our own personnel and the Coast Guard in our dependents' hospitals and we have at the present time 23 hospitals in the continental limits of the United States where this work is being carried on.

The question of cost for the care of these dependents was gone into very carefully and in the beginning we charged \$3.75 a day, which was the reciprocal rate of hospitalization set by the Federal Board for Hospitalization. That worked a real hardship on most of the service personnel. With the comparatively low rates of pay of the men in the lower pay grades, to send a wife to the hospital, to a naval hospital, to have a baby, for instance, would cost around \$40 or \$50 before she got out, and that is a pretty good lump to come out of a man's pay check.

So, when the legislation was passed expanding these facilities, we asked that a lower rate be set and we made a study and found that the cost of care of dependents averaged around \$2. That included, of course, food, laundry, the salaries of civilian employees, and medication, and special appliances which were necessary for these particular types of cases. It did not, and does not, include, of course, the salaries of medical personnel, of the nursing staff, or hospital corpsmen.

We thought that even \$2 was more than these men should be required to pay, so we recommended a rate of \$1.75, which just about almost covers the actual cost of that care, and that is the rate under which we are now operating, set by the President. And in the law it states that that will be the rate until such time as the Director of the Budget has an opportunity to make a thorough study of the whole subject and make further recommendations, when there may be some change.

So far as we are concerned; so far as the Navy is concerned—the Medical Department of the Navy—I better limit it to that—we feel that it was the intent of Congress in passing this law to give men hospitalization at a rate which they could pay, without crippling them, and, therefore, we hope that the rate will be always that prescribed by the President and that it will be kept lower than that of the rate for reciprocal hospitalization set by the Federal Board, which is now \$4.25 and the 1st of July becomes \$5.

Mr. PRIEST. Mr. Chairman, may I ask the Admiral a question at this point?

Mr. BULWINKLE. Mr. Priest.

Mr. PRIEST. I want to ask if the last sentence of paragraph (b) on page 35 as it is incorporated in this legislation would be sufficient to guarantee, insofar as legislation may guarantee, that the provisions you have in mind would remain in effect and permanent. That is—such cost shall be equivalent to the uniform per diem reimbursement rate, approved by the President for Government hospitals for the fiscal year in which such hospitalization is furnished.

Admiral SHELDON. No, sir. That refers to the reciprocal rate for treatment of personnel between Government hospitals; the Navy, the Army hospitals, Public Health Service hospitals, and that is the higher rate.

This rate has no relation to that at all.



Mr. PRIEST. Well, that was a question in my mind. I was not sure about this.

Admiral SHELDON. If something could be put in—I am not suggesting any change in this act, because I know nothing about it, and I have no right to, but so far as we are concerned—

Mr. BULWINKLE. You have a right to be here, and it is because of that right we asked you to be here.

Admiral SHELDON. We would rather go on and have the rates set annually by the President, based upon what is considered a fair rate for persons in the lower-pay grades.

Thank you.

Mr. BULWINKLE. Any further questions, Mr. Priest?

Mr. PRIEST. I have no further questions.

Mr. BULWINKLE. Anything further, Admiral?

Admiral SHELDON. I think that is about all I have to say, Mr. Chairman.

Mr. BULWINKLE. We thank you very much, sir.

Admiral SHELDON. Thank you very much.

Mr. BULWINKLE. We will hear Lt. Robert H Skilton, Bureau of Naval Personnel.

**STATEMENT OF LT. (JR. GR.) ROBERT H. SKILTON UNITED STATES  
NAVAL RESERVE, BUREAU OF NAVAL PERSONNEL, UNITED  
STATES NAVY**

Lieutenant SKILTON. Mr. Chairman, the Bureau of Naval Personnel has just one comment to make about the bill. It has been observed that it was apparently drafted before the passage of Public Law 184.

Mr. BULWINKLE. It was.

Lieutenant SKILTON. Which draws a distinction between full and limited military benefits, giving full military benefits to the personnel of the Public Health Service detailed for duty with the Army, Navy, or Coast Guard. This distinction would be eliminated if the President should issue an Executive order making the entire commissioned corps of the Public Health Service part of the military forces.

The Bureau thinks it would be appropriate and would further the purposes of codification if the principles, the formula of Public Law 184 were incorporated into this bill.

Mr. BULWINKLE. Otherwise, it is all right?

Lieutenant SKILTON. Yes, sir.

Mr. BULWINKLE. Any questions?

Mr. PRIEST. No questions.

Mr. BULWINKLE. Thank you very much.

Lieutenant SKILTON. Thank you.

Mr. BULWINKLE. We will hear Lieutenant Drexler.

**STATEMENT OF LT. STANLEY L. DREXLER, UNITED STATES  
COAST GUARD RESERVE**

Lieutenant DREXLER. Mr. Chairman, I wish to thank you for this opportunity to present the views of the Coast Guard on H. R. 3349.

From December 1941 until July 1943, when I was ordered to active duty in the Coast Guard, I was assigned to the Public Health Service

as a member of the staff of the General counsel's office, Federal Security Agency, in which capacity I assisted Dr. Parran, Lieutenant Calhoun, Mr. Willcox, and the others who have prepared this bill. Because of the interest of the Coast Guard in this bill, I have been permitted to continue to work on the bill and to participate with Mr. Willcox in these hearings.

The interest of the Coast Guard in the bill arises out of the following circumstances. More than 500 commissioned medical officers of the Public Health Service are on duty on Coast Guard vessels and on other assignments with the Coast Guard, and while so serving are part of the naval forces of the United States, under an Executive order of the President. In addition, the enlisted and commissioned personnel of the Coast Guard constitute one of the principal classes of persons entitled to hospital, medical, surgical, and dental care at the hospitals and other stations of the Public Health Service. Coast Guard officers are charged by law with the duty of helping to enforce the quarantine laws administered by the Public Health Service, and the relationship of the two services dates back to the first decades of the history of the United States.

Mr. Chairman, I should like to place in the record at the conclusion of my statement a communication dated February 25, 1944, from the Commandant of the Coast Guard to the Judge Advocate General of the Navy, expressing the views of the Coast Guard on this bill. While this communication was sent in response to a request of the Senate Committee on Education and Labor for written comment on S. 1683, which is a companion measure to H. R. 3379, it was felt that in view of the fact that this code grew out of your suggestion, Mr. Chairman, and of the intensive and patient work of the committee on the bill, these comments should first be presented orally to your committee. Since these comments contain one proposal for substantive change in present law—I might say that that is the same change to which Admiral Sheldon addressed his testimony—I am obliged to point out that there has not been time, either since the request of the Senate committee for written comment or the invitation of this committee for oral testimony, for the Navy to present the views of the Coast Guard to the Bureau of the Budget for clearance. Therefore, this statement is being made without Budget clearance at this time.

The first paragraph of the Coast Guard memorandum states the purposes of the bill to be the codification of the laws relating to the Public Health Service, and the revision, clarification, and rationalization of obscure, conflicting, and obsolete provisions.

The second paragraph points out the reasons for the interest of the Coast Guard in the bill, which I have already stated, and calls attention to the fact that many of the provisions of the bill affecting the Coast Guard are the result of collaborative effort by representatives of the two services.

The third paragraph indicates the particular interest of the Coast Guard, in view of the large number of Public Health Service commissioned officers serving with the Coast Guard, in their status for purposes of the so-called military benefits, and calls attention to the fact that the bill in its present form does not incorporate the benefit formula of Public Law 184. It is the position of the Coast Guard that sections 8, 9, and 10 of Public Law 184, which provide full military benefits for Public Health Service officers serving with the Coast Guard

should be incorporated in the code, and, as the committee knows, this is also the recommendation of the Public Health Service, the Bureau of the Budget, the Federal Security Agency, and is the position which has been taken by the committee.

Mr. PRIEST. Will you pardon an interruption there?

Lieutenant DREXLER. Surely.

Mr. PRIEST. What sections, by number, did you refer to there?

Lieutenant DREXLER. Sections 8, 9, and 10, of Public Law 184. Those are the sections, Mr. Priest, which provide for full military benefits.

The fourth paragraph lists seven sections of the bill which are of particular concern to the Coast Guard, but without objection to any of their terms.

The fifth paragraph recommends the restoration of a provision of existing law expressly authorizing the detail of commissioned officers of the Public Health Service for duty aboard vessels of the Coast Guard. This recommendation has already been made by the Public Health Service, and a similar recommendation has been made by Commander Bond with regard to vessels of the Coast and Geodetic Survey.

The sixth paragraph embodies a recommendation for a change in existing law which requires some explanation. If you will turn to page 35 of the bill and read subsection (b) of section 326, you will notice that the dependents of Coast Guard, Coast and Geodetic Survey, and Public Health Service personnel pay for hospitalization at the uniform per diem rate approved by the President for Government hospitals for the fiscal year in which the hospitalization is furnished. That rate is now and since October 1942 has been fixed at \$4.25. Now Coast Guard personnel, who are, of course, part of the Navy, are also entitled to hospitalization for their dependents at naval hospitals, just as are other branches of the Navy. That right is given Coast Guard personnel under Public Law 51, Seventy-eighth Congress. The rate, however, is to be fixed by the President from time to time by Executive order. On December 23, 1943, the President fixed the rate at \$1.75. The Coast Guard can see no reason why the dependents of its personnel should pay \$4.25 for hospitalization at Public Health Service hospitals but only \$1.25 at naval hospitals, and it therefore proposes that this subsection be amended to provide that hospitalization of Coast Guard dependents at Public Health Service hospitals be at the same rates fixed by the President from time to time for hospitalization of Coast Guard and other naval dependents at naval hospitals. This matter has been the subject of correspondence between the Commandant of the Coast Guard and the Surgeon General of the Public Health Service, and the latter has stated that he would have no objection to this change in the law.

The seventh paragraph recommends the deletion of three words on page 53, section 365 (b), line 25. The words are "under their direction." This subsection requires customs and Coast Guard officers to assist in the enforcement of quarantine laws and regulations. Since Coast Guard officers are officers of the customs in their own right, we believe it would be more appropriate to eliminate the words mentioned, since Coast Guard officers will be acting independently of other customs officers.



The eighth paragraph requests a change which has already been suggested by the Public Health Service and agreed upon by the committee—the change of the per diem travel rate of Public Health Service officers from \$8 to \$7 in section 606, page 72, line 11.

The memorandum concludes as follows:

With the changes suggested above the bill is acceptable to the Coast Guard, which urges its enactment as a measure which will result in major clarification and simplification of numerous and scattered provisions of existing law, which are now difficult to interpret and apply.

As one whose job it was for nearly 2 years to interpret and apply those provisions, I say amen, and add the expression of my gratitude to those of Dr. Parran, Mr. Willcox, and Lieutenant Calhoun to this committee for its interest and its patience in this work, which I believe will always be a landmark in this field of the law.

Mr. BULWINKLE. Any questions, gentlemen?

Mr. PRIEST. No questions. I would just like personally, Mr. Chairman, to thank Lieutenant Drexler for the aid that he has given in the preparation of this bill and in consulting with the committee in clarifying and helping to clarify many provisions. I think we owe him certainly an expression of our appreciation for his valuable services, if not a debt of gratitude, sir.

Lieutenant DREXLER. Thank you.

Mr. BULWINKLE. I might say also that I want you to understand that you are not relieved from duty up here, either.

Mr. PRIEST. No; we still need you.

Mr. WILLCOX. I appreciate that deeply.

Lieutenant DREXLER. Thank you very much. I will express that to the Coast Guard and hope they will concur.

(The letter above referred to is as follows:)

FEBRUARY 25, 1944.

To: The Judge Advocate General of the Navy.

Subject: S. 1683, to codify the laws relating to the Public Health Service, and for other purposes.

1. The purposes of S. 1683 are the codification of the laws relating to the Public Health Service and the revision, clarification, and rationalization of obscure, conflicting, and obsolete provisions.

2. Because medical services in the Coast Guard are performed by Public Health Service personnel, because Coast Guard personnel receive medical and hospital care at Public Health Service institutions, and because of the close historical and administrative interrelationship between the Coast Guard and the Public Health Service in the field of maritime quarantine, the Coast Guard was consulted by the Public Health Service in the drafting of S. 1683, and many of its provisions affecting the Coast Guard are the result of collaborative effort by the two services.

Because more than 500 commissioned officers of the Public Health Service are now detailed for duty with the Coast Guard, the Coast Guard is interested in the provisions of the subject bill relating to the status of commissioned officers of the Public Health Service for retirement and military benefit purposes. These sections (212, 213, 215 (a), 216, 605, 606, 607, and 608) appear to have been drafted prior to the enactment of Public Law 184, Seventy-eighth Congress, and appear to require considerable revision and extension if the general formula provided in sections 8, 9, and 10 of Public Law 184 is to be carried out in terms of specifically enumerated benefits along the lines indicated in the sections of the subject bill referred to above.

4. The following sections affect the Coast Guard:

(a) Section 205 (b), which provides for the assignment of a commissioned medical officer of the regular corps of the Public Health Service to be the chief medical officer of the Coast Guard with the title of Assistant Surgeon General while so serving.



(b) Section 206 (a) which provides that assistant surgeons general while assigned as such, shall have the grade corresponding with brigadier general of the Army, with the same pay and allowances.

(c) Section 214 (a) which provides for the detail of Public Health Service personnel to executive departments.

(d) Section 215 (a) which provides, among other things, for Presidential regulations regarding the discipline of commissioned officers of the Public Health Service.

(e) Section 216 which provides for the wartime utilization and militarization of the Public Health Service.

(f) Section 326 which provides for medical, surgical, and dental treatment and hospitalization of personnel of the Coast Guard and their dependents, the furnishing by the Public Health Service of all services to the Coast Guard in connection with treatment and hospitalization of Coast Guard personnel, and for the extension of medical aid by Public Health Service personnel assigned to duty on Coast Guard vessels to the crews of American vessels engaged in deep-sea fishing.

(g) Sections 361-369 which provide for the control of communicable diseases, including maritime quarantine.

5. In section 326 (a) it is recommended that language be inserted which would provide that in carrying out the purposes of that subsection, the Surgeon General would be authorized to detail commissioned officers aboard vessels of the Coast Guard. This procedure is expressly sanctioned by existing law (14 U. S. C. 59) and should be expressly provided for in the proposed codification.

6. Section 326 (b) provides for the hospitalization of dependents of Coast Guard personnel at Public Health Service hospitals at a per diem cost "equivalent to the uniform per diem reimbursement rate approved by the President for Government hospitals for the fiscal year in which such hospitalization is furnished." Under Public Law 51, Seventy-eighth Congress, dependents of Coast Guard personnel may be hospitalized at any naval hospital at "such per diem or other rate as may be prescribed from time to time by the President." The rates prescribed by the President under Public Law 51 differ substantially from the reimbursement rate approved by him for Government hospitals. The result is that Coast Guard dependents are charged different rates at Public Health Service hospitals and at naval hospitals. It is suggested that section 326 (b) be amended insofar as it affects the Coast Guard, to provide that the hospitalization of Coast Guard dependents be at the rates prescribed by the President from time to time for hospitalization of dependents of naval personnel under Public Law 51.

7. In section 365 (b), page 53, line 25, it is recommended that the words "under their direction" be eliminated. Coast Guard officers serve as customs enforcement officers without immediate responsibility to customs officers.

8. In section 606, page 72, line 11, the figure "8" should be changed to "7" to conform with the rates authorized for the other services.

9. With the changes suggested above, the bill is acceptable to the Coast Guard, which urges its enactment as a measure which will result in major clarification and simplification of numerous and scattered provisions of existing law, which are now difficult to interpret and apply.

R. R. WAESCHE.

#### STATEMENT OF COMMANDER N. L. QUEEN, UNITED STATES MARITIME SERVICE, TRAINING ORGANIZATION, WAR SHIPPING ADMINISTRATION

Commander QUEEN. Mr. Chairman, on page 31, line 22, the benefits are stated to: "Cadets on State school ships."

That was in the old bill.

Mr. BULWINKLE. You mean the old law?

Commander QUEEN. The old law, I should say, sir. At the present time there are five State maritime academies and they are provided with a school ship or a training vessel to cruise the cadets for their required length of time.

This reads right now, the cadets on the school ship or the training vessels would only be eligible for hospitalization while they are at-

tached, but not while they are ashore at their shore base. The length of the course is 18 months and they are required to cruise aboard a training vessel for two 3-month cruises, and I say, for those academies, they are aboard ship for that length of time and the remainder of the time they are ashore and therefore, as it now stands they would not be eligible for hospitalization.

Mr. PRIEST. While they were at the shore base?

Commander QUEEN. While they are at the shore base. And, it is suggested that if that could be rewritten, instead of saying, "State school ships," say, "Cadets at State maritime academies"—so that they would be protected not only while they are aboard ship, but ashore as well.

Mr. SCOTT. In Pennsylvania they used to have the school ship *Annapolis*, now the *Keystone State*.

What is their arrangement as to the cost; do they have an arrangement to cover that? You just spoke of it with regard to the shore base. Do they pay the tuition while they are shore based, as well as instruction on the school ship?

Commander QUEEN. Do they pay tuition?

Mr. SCOTT. Do they have that arrangement for the two 3-month cruises, plus the 12 months ashore?

Commander QUEEN. That is, a cadet has no shore base in Pennsylvania at the present moment.

Mr. SCOTT. I asked that, because I understood that we had a peculiar arrangement.

Mr. PRIEST. That is one of the five that does not have?

Mr. SCOTT. I thought that we were in that peculiar situation.

Commander QUEEN. They are getting a shore base, but they do not have one as yet.

California, Maine, Massachusetts, and New York all have shore bases and a ship is supplied for each one of those to cruise their cadets, but they are ashore a majority of the time.

Mr. BULWINKLE. Would it not be better to say, "Cadets at State maritime academies" instead of cadets on State school ships?

Commander QUEEN. That would be all right, sir; yes, sir; or instead of school ships—they are no longer called school ships—they are State training vessels.

Mr. BULWINKLE. State training vessels?

Commander QUEEN. Yes, sir; or training ships.

Mr. BULWINKLE. Anything else?

Commander QUEEN. That is all, sir.

Mr. BULWINKLE. Thank you, sir.

Do you have anything further?

Commander QUEEN. That is all.

#### STATEMENT OF ENSIGN A. HALE BOGGS, CHIEF LEGAL OFFICER, TRAINING ORGANIZATION, WAR SHIPPING ADMINISTRATION

Mr. PRIEST. Mr. Chairman, we have here one of our former distinguished colleagues, who has a little matter he would like to discuss very briefly, and I am sure we will be glad to hear him.

Mr. BULWINKLE. We will be glad to hear him.

Ensign BOGGS. Mr. Chairman, I am here today representing the Training Organization of the War Shipping Administration and I

have only one suggestion to make other suggestions that have already been made by Commander Queen, who is in charge of State Maritime Administration and Federal functions thereof.

On page 35, paragraph (b), which seems to be the section most frequently discussed here this morning, it is the feeling of the War Shipping Administration that the dependents of administrative personnel of the United States Maritime Service on active duty and the United States Merchant Marine Cadet Corps should be included in the hospitalization provided for in that section.

Mr. BULWINKLE. How many would be entitled to those benefits?

Ensign BOGGS. I cannot answer that question. I think that could be supplied for the record.

The Public Health Service is now furnishing medical attention to the United States Maritime Service and the Merchant Marine Cadet Corps, so that actually all that this would mean would be the extension of hospitalization and medical care to their dependents. Insofar as the enlisted personnel is concerned, in the Office of Personnel, they are already provided for in this legislation as written.

Mr. BULWINKLE. The question might be asked, and I would like for you to give consideration to it, as to the number who will be affected. You can put that in the record in connection with your remarks; give us an idea as to about the average or approximately what the additional cost would be.

Ensign BOGGS. Yes, sir.

Mr. BULWINKLE. Because we will be asked that question.

Ensign BOGGS. We will get that information for you.

Mr. BULWINKLE. And put it in your remarks, or the doctor can put it in his remarks if he wishes to take the stand.

Ensign BOGGS. I think that is the only paragraph the War Shipping Administration is interested in.

Mr. BULWINKLE. Otherwise, you find it all right?

Ensign BOGGS. Otherwise, we very much approve it.

Mr. BULWINKLE. Thank you very much.

Ensign BOGGS. Thank you.

Mr. PRIEST. We are very pleased to see you here.

Mr. BULWINKLE. Is there anyone else to be heard?

If not, the hearings will be closed, unless someone desires to come up from the War Department tomorrow. And, within a short time this committee will get together, have an executive session with Mr. Willcox, Lieutenant Drexler, and some others, and determine when we will take up the bill.

The Chair desires to have inserted in the record a letter from the Secretary of Labor to the Chairman of the Interstate and Foreign Commerce Committee, Mr. Lea, in regard to certain provisions of the bill, some of which we have already gone into.

(The letter referred to is as follows:)

DEPARTMENT OF LABOR,  
OFFICE OF THE SECRETARY,  
Washington, March 9, 1944.

HON. CLARENCE F. LEA,

*Chairman, Interstate and Foreign Commerce Committee,  
House of Representatives, Washington, D. C.*

DEAR CONGRESSMAN LEA: This Department views with concern certain provisions of H. R. 3379, a bill to codify the laws relating to the Public Health Service and for other purposes, which is presently before your committee for consideration. I am availing myself of this opportunity to acquaint you with



my views on those provisions, the relation of which to the program of the Department of Labor may not be manifest on a casual reading of the bill.

My objections relate to the provision in title III of the bill which seeks not only congressional confirmation of activities of the Public Health Service in the field of industrial hygiene heretofore engaged in by virtue of a broad interpretation of the term "public health" under title VI of the Social Security Act of 1935, but authority for the Public Health Service and, consequently, the State public health agencies to move into the whole field of accident prevention. Embarkation into the field of industrial safety is clearly contemplated by the language of section 301 of the bill which directs the Surgeon General to "encourage, cooperate with, and render assistance to other appropriate public authorities \* \* \* in the conduct of, and promote the coordination of, research, investigations, experiments, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases, *defects and injuries of man, including environmental sanitation, industrial hygiene, \* \* \**" [italics supplied], and by section 314 (b) which authorizes an appropriation to enable the Surgeon General to assist States, through grants, in establishing adequate public health services and to enable him to conduct health and sanitation activities in "Government and private industrial plants engaged in defense work. \* \* \*\*"

In view of the well-known fact that at least 95 out of 100 work injuries to men are caused by accidents wholly unrelated to health exposure, nothing could be more unrealistic than an attempt by health agencies, either at the Federal or State level, to seek jurisdiction over the field of accident prevention or the control of hazardous work conditions. State laws specifically give to their labor departments all direct responsibility for the enforcement of regulations pertaining to the safety and health of workers in industrial operations. State health departments have neither the authority nor the facilities to take over these functions and it is apparent that no amount of grants in aid will change the jurisdictional picture. The ability to get tangible remedial results should be a primary test in evaluating programs of this kind. Under such a test the questions of legal jurisdiction and current and historical responsibility are of paramount importance. At the State level, we find in each of 47 States, a labor department, industrial commission, board or bureau, set up to administer all State labor laws. In every State regulations pertaining to the safety and health of wage earners form the greater part of these labor laws.<sup>1</sup> Typical of the scope of the authority and responsibility vested by statute in State labor departments are the duties and functions of the Alabama Department of Industrial Relations which read as follows:

"(6) To give instructions and information and to conduct educational programs for the purpose of promoting safety and health in employment \* \* \*\*"

"(10) To make investigations and studies and to collect, collate and compile statistical information and to make and publish reports, concerning the conditions of labor generally, including living conditions, hours of work, wages paid, safety devices, safety guards, *means and methods of protecting against accidents, illness and diseases in employment*, and concerning all matters relating to the enforcement and effect of the provisions of this chapter and the rules and regulations issued pursuant thereto and other labor laws and laws relating to the relationship between employer and employee." [Italics supplied.]<sup>2</sup>

In this enactment there is a clear, direct, and unequivocal delegation of responsibility to the labor department to exercise supervision over working conditions, including, specifically, safety and health exposures. This responsibility cannot be assumed by the State health agencies even through the employment of such a term as "environmental health," which is frequently employed in connection with public-health programs. Specific language to the same effect appears in other State acts creating labor departments. Indeed, from the very beginning State labor laws dealing with safe and healthful working conditions have been looked upon as coming within the scope and the authority of the State agencies set up to foster and promote the interests of wage earners. The only specific Federal regulation pertaining to safety and health conditions in private industry appears in the Walsh-Healey Public Contracts Act. This act places responsibility for enforcement upon the United States Department of Labor. The same line of demarcation between health and labor departments has been

<sup>1</sup> See Appendix I (analysis of State agencies dealing with industrial health and safety and statutory regulatory provisions relating to dust control) in Final Report to the Committee on Regulatory and Administrative Phases of the Silicosis Problem, Bulletin No. 21, Part 4, of Division of Labor Standards, Department of Labor, 1938.

<sup>2</sup> Alabama Code (1940), title 26, sec. 3.



recognized in industrial nations throughout the world—Great Britain, Holland, Belgium, Switzerland, the Scandinavian countries, pre-Hitler Germany, and Austria.

For many years there has been a close relationship between the Federal and the State labor departments and a continuing collaboration in the development of effective and uniform statutory provisions and methods of administering regulations pertaining to safe and healthful working conditions. The United States Department of Labor was set up under a mandate to "foster, promote, and develop the welfare of wage earners and to improve their working conditions." Most of the laws creating State labor departments use identical or similar language. It follows, therefore, that since the objectives are the same at the Federal and State levels, there should be close coordination between the Federal and State departments of labor in approaching their objectives.

On the other hand, there is practically no relationship whatever between the United States Public Health Service and the State labor departments. Traditionally, and quite properly, the Public Health Service maintains a close contact with the State health agencies. The flow of constructive work into an industrial hygiene unit in a State must necessarily emanate from the State agency having responsibility for the inspection and the regulation of conditions in work places. Day-to-day contact with industrial plants by the factory inspection force is what brings to light the need for specialized industrial hygiene service which requires the skill of industrial engineers more frequently than it requires the skill of men of medicine. Lacking these contacts, and the statutory right of entry which is accorded to State labor departments,<sup>3</sup> industrial hygiene in State health departments must necessarily be confined to incidental research or exploration. I do not wish to imply that this type of service is without value. The constant expansion of industrial processes from time to time call for new research, study, and experimentation. I desire to make the point, however, that the principal over-all work of an industrial hygiene service is so closely tied up with the responsibilities and the functions of State labor departments that only when it is located in such agencies can it make the most effective contribution to the safety and health of workers.

It should hardly be necessary to present an argument against the extension of public-health activities into and the exclusion of labor services from the field of industrial safety and accident prevention. By no process of reasoning can the work of accident prevention be tied in, realistically, with a Public Health Service function, either at the State or the Federal level. This point is best illustrated, perhaps, by recalling that there are today some 15,000 or more industrial plant safety engineers, of whom less than half a dozen are members of the medical profession. Under the language of section 301 of H. R. 3379, however, it would be possible for the Public Health Service to set up projects studying accident causes, accident frequency and severity such as have been compiled for 25 years by the Bureau of Labor Statistics. Certainly the term "injuries to man," or the proposed amendment "impairment of man," is sufficiently broad to justify the development of safety codes, the techniques of accident prevention, and practically the whole field of industrial accident prevention which for more than a quarter of a century has been the sole province of the State and Federal labor departments.

Inasmuch as H. R. 3379 purports to be a codification of laws relating to the Public Health Service, it is reasonable to expect that the description of the duties of that Service, in current law, would in some degree encompass the activities contemplated in sections 301 and 314 (b). However, the broadest description of the purposes of the Service that I can find is contained in 42 United States Code 7 which provides:

"The Public Health Service may study and investigate the diseases of man and conditions influencing the propagation and spread thereof, including sanitation and sewage and the pollution either directly or indirectly of the navigable streams and lakes of the United States \* \* \*"

It will probably be pointed out by the bill's proponents that a considerable number of the States have been fit to establish industrial hygiene bureaus in their State health units. This is correct, of course, but it is due entirely to the fact that the Surgeon General, acting under title VI of the Social Security Act, and dis-

<sup>3</sup> The right of entry, indispensable to the administration and enforcement of industrial health and safety programs, is always granted, by statute, to State labor departments, but only in isolated instances to State health agencies. This is conceded by the Public Health Service in 58 Public Health Reports, No. 2 (January 8, 1943), p. 49, in which it is said: "In the main, power of entry for inspectional purposes is delegated to the department of labor or industrial commission since this is the situation which exists in nearly three-fourths of the States."

regarding the undoubted statutory predominance of labor departments in the field of industrial hygiene made funds available to the States for that purpose under a policy which restricted the grants to the State health departments.<sup>4</sup>

Although I do not mean to intimate that the action of the Public Health Service in this respect was improper or illegal, I do suggest that encouragement of State health agencies in the field of industrial hygiene runs counter to established relationships and practices.

Another consideration of great weight in this matter is the fact that industrial safety and health, as the primary concern of wage earners and their labor organizations has always been regarded as an important labor program. As such, it has logically and historically fallen into the category of programs administered by the State agencies directly concerned with labor problems, viz, the departments of labor. Even if the health agencies have a legitimate professional interest in industrial health and safety, it must be appreciated that they are handicapped by a lack of relationships and contacts with the groups and organizations most immediately affected by working conditions harmful to health and safety. The program of the Public Health Service, therefore, will not only run counter to current statutory authorizations and State practices, but the wishes of those groups whose immediate interest is the establishment and efficient operation of State industrial health and safety laws. The Tenth National Conference on Labor Legislation, held in Kansas City December 8-9, 1943, and made up of representatives of the Governors of the States, went on record as follows:

*"Industrial Hygiene Divisions in State Labor Departments.*

"Expanding war production has uncovered many new worker health hazards on which data for adequate detection, prevention, and control are lacking. This conference therefore recommends that the United States Department of Labor collect all available information on such hazards and make it available in printed form to State labor departments, labor, and industry.

"The conference further recommends that since the legal responsibility for the maintenance of safe and healthful work places, together with the right of entry and machinery for inspection, is vested in the State departments of labor, industrial hygiene divisions should be set up in labor departments to make the daily application of these accepted standards."

The Public Health Service as the agency of the Federal Government charged with duties relating to the health of the national community doubtless has a legitimate interest in conditions within as well as without industrial establishments, to the extent that they affect the health of the public. In view of the historical character of the industrial health and accident problem, however, and the desirability of having industrial health programs administered and enforced by those agencies most immediately concerned with their welfare and the conditions under which wage earners work, it is suggested that the interest of the Public Health Service and the interest of the State health services should be confined to studies and researches in respect to the toxicity and physical effect of contaminants and noxious substances, particularly as newly developed processes create new exposures. The engineering, investigatory, administrative, and enforcement functions should be performed by the State departments of labor, as they are at present. It follows that the Department of Labor and not the Public Health Service should administer any program of aid to the States in establishing, developing, and administering their in-plant health programs.

I trust that your committee, if it acts favorably upon this proposed measure, will make clear that the broad grant of power contained therein should not be construed as giving the Public Health Service joint jurisdiction with the labor departments, State and Federal, in the promotion, administration, and enforcement of health and safety regulations in industry. It will be appreciated if this letter could be made a part of the record of the hearings on this bill.

The Bureau of the Budget advises that it has no objection to my bringing to the attention of your committee the considerations set forth in this letter.

Sincerely yours,

FRANCES PERKINS.

<sup>4</sup> Although title VI of the Social Security Act authorizes funds to be granted to States for general public health services, it does not specifically or by reasonable inference authorize the Public Health Service to induce, by Federal grants, the transference of industrial health, administration, and enforcement from State departments of labor to State departments of health. There is nothing in the legislative history of that title to indicate that Congress intended to build up State health departments in the industrial field at the expense of the State labor departments. (See S. Rept. No. 628 of Committee on Finance of the 74th Cong. to accompany H. R. 7260, p. 21, and also S. Rept. No. 615 of the 74th Cong., 1st sess., to accompany H. R. 7260, p. 13.)



WAR SHIPPING ADMINISTRATION,  
TRAINING ORGANIZATION,  
Washington, D. C., March 15, 1944.

Hon. A. L. BULWINKLE,  
*House Committee on Interstate and Foreign Commerce,  
House of Representatives, Washington, D. C.*

DEAR MAJOR BULWINKLE: Following my testimony of yesterday before your Subcommittee of the Interstate and Foreign Commerce Committee, which is now considering H. R. 3379, you requested information as to the approximate number of dependents who would be covered if paragraph (b), section 326 on page 35 of the pending legislation were amended to include enrollees in the United States Maritime Service and members of the Merchant Marine Cadet Corps on active duty.

Our records indicate that the maximum number of dependents who would be entitled to medical advice and out-patient treatment by the Public Health Service, upon paying the per diem as set by the President, would not exceed a total of 10,000.

On February 1, 1944, our records showed the following: 2,855 men between the ages of 18 and 37, married without children; 185 men between the ages of 38 and 44, married without children; 1,940 men between the ages of 18 and 37, married with children; 204 men between the ages of 38 and 44 married with children. These figures do not include trainees in the Maritime Service, but a large percentage of these men are unmarried, without dependents, and their training periods are relatively short. All members of the Merchant Marine Cadet Corps are unmarried young men.

It is suggested that paragraph (b) of section 326 on page 35 be amended to read as follows: "The dependent members of families of commissioned officers of the Service and of officers and enlisted personnel of the Coast Guard, and the Coast and Geodetic Survey, and of enrollees in the United States Maritime Service on active duty and members of the Merchant Marine Cadet Corps. \* \* \* Under this language these dependents' rights would be limited to enrollees in the Maritime Service and members of the Merchant Marine Cadet Corps while on active duty only.

Your courtesy and that of the other members of the subcommittee was greatly appreciated.

Respectfully yours,

HALE BOGGS,  
*Ensign, United States Naval Reserve, Chief Legal Officer.*

WAR SHIPPING ADMINISTRATION,  
TRAINING ORGANIZATION,  
Washington, D. C., March 16, 1944.

Hon. A. L. BULWINKLE,  
*House Committee on Interstate and Foreign Commerce,  
House of Representatives, Washington, D. C.*

DEAR MAJOR BULWINKLE: In connection with my testimony on Tuesday before your subcommittee of the Interstate and Foreign Commerce Committee, considering H. R. 3379, I trust that the bill can be amended so that cadets at the State maritime academies stationed ashore will be covered.

You will recall that I discussed this situation in my testimony and it was your suggestion that line 22, paragraph (4) on page 31 be amended to read: "Cadets attached to State maritime academies and State training vessels." It was further suggested that the phrase "State school ships" on line 19, page 31, be changed to read "State training vessels."

Please accept my appreciation for your courtesy and that of the other members of the subcommittee.

Very truly yours,

NORMAN L. QUEEN,  
*Commander, United States Maritime Service;  
Supervisor, State Maritime Academies.*



THE CENTRAL LABOR UNION AND THE METAL TRADES COUNCIL  
OF THE PANAMA CANAL ZONE,

March 16, 1944.

HON. ALFRED L. BULWINKLE,

*Chairman, Subcommittee on Public Health Service,  
Interstate and Foreign Commerce,*

*House of Representatives, Washington, D. C.*

DEAR MAJOR BULWINKLE: You recently received a letter from the Maritime Engineers Mutual Beneficial Association (Congress of Industrial Organizations) requesting that a change be made in H. R. 3379 to codify the laws relating to Public Health Service, and for other purposes. The change suggested is deleting from line 20, page 31, the following six words: "Other than those of the Panama Canal."

The representative of the M. E. D. A. for the Canal Zone attempted to obtain this result in H. R. 4251, section 5, a copy of which I enclose, marked as follows:

"SEC. 5. The term 'seaman' whenever employed in legislation or regulations relating to the Public Health Service shall be held to include marine employees of the Panama Canal."

Until a consultation was held on Tuesday with Dr. E. H. Carnes, senior surgeon, together with R. T. Hollinger and G. M. Harris, of the Public Health Service, it was not known that your committee was engaged in codifying the Public Health Service laws. These gentlemen suggested that the most effective way to accomplish the result desired would be to delete the words I suggest in the second paragraph.

The organization I have the honor to represent is fully in accord with such a change and a resolution to that effect was approved at the last convention of the American Federation of Labor.

Under the terms of Executive order dated February 20, 1914, Panama Canal and Panama Railroad employees are given free medical treatment and hospitalization (in ward) with a charge of \$1 per day for subsistence. Surgical operations and dental work is charged for at rates prescribed by the Panama Canal.

The change requested deleting the words "other than those of the Panama Canal" would place the marine employees of the Panama Canal on the same basis as those covered by paragraph 3, section 322, of H. R. 3379 and would entitle them to "medical, surgical and dental and hospitalization without charge," as covered by subparagraph A of section 322.

Thanking you for your consideration in this matter, I am

Yours sincerely,

CHARLES F. WAHL,

*President and Legislative Representative.*

P. S.—The Governor's recommendation through the Secretary of War contained in hearings on H. R. 156 held on January 9, 1936, is as follows:

"The Governor of the Panama Canal has recommended that bill S. 2625 'To extend the facilities of the Public Health Service to seamen on Government vessels not in the Military or Naval Establishments,' which was passed by the Senate on May 20, 1935, and referred to your committee on May 24, be amended so as to exclude from its provisions Panama Canal employees.

"The Governor's reasons for this recommendation and the method suggested by him for accomplishing the results desired are set forth in his letter which is quoted below:

"In its present form the above-titled bill is applicable to employees of the Panama Canal employed on vessels and other floating equipment used in the construction, operation, and maintenance of the Canal notwithstanding the fact that the medical care and hospitalization of such employees is specially provided for in the Executive order of February 2, 1914, as amended.

"Since there is no need for the inclusion of Canal employees in the said bill in order that they may be provided with free medical and hospital care, it is recommended that endeavor be made to secure the amendment of the bill by the insertion of the words "other than those of the Panama Canal," after the word "Government" in line 7."

HOUSE OF REPRESENTATIVES,  
Washington, D. C., March 21, 1944.

HON. ALFRED L. BULWINKLE, M. C.,

*House Office Building, Washington, D. C.*

DEAR MR. BULWINKLE: Following my telephone conversation with you this morning I am submitting a statement by J. W. Holloway, Jr., who is the director

of the bureau of legal medicine and legislation of the American Medical Association. This statement to be inserted in the hearings on H. R. 3379, a bill to codify the laws of the United States Public Health Service.

I appreciate the opportunity of having this statement made a part of the hearings.

Very truly yours,

A. L. MILLER, M. C.,  
*Fourth District, Nebraska.*

#### OSTEOPATHS AS MEDICAL OFFICERS OF THE UNITED STATES PUBLIC HEALTH SERVICE

J. W. Holloway, Jr., Director Bureau of Legal Medicine and Legislation,  
American Medical Association

Representatives of osteopathy appeared before a subcommittee of the House Committee on Interstate and Foreign Commerce, March 10, in connection with the hearing scheduled on H. R. 3379, a bill to codify the laws relating to the Public Health Service and for other purposes. They appeared in support of a provision contemplating the appointment of osteopaths as officers of the United States Public Health Service. The supporting evidence offered contained inferences that the facts do not justify and the purpose of this statement is to present the facts.

The chairman of the department of public relations of the American Osteopathic Association testified that in a number of States osteopathic applicants are required to take the same examination as graduates of medical schools and are given identical or equivalent licenses to practice. As an example of how osteopathic candidates "measure up in these examinations" he referred to a report of the New Jersey State Board of Medical Examiners, published in the April 6, 1940, issue of the Journal of the American Medical Association, on page 1402. This report related to an examination held by the New Jersey board during the month of October 1939. At this examination, there was a total of 115 medical applicants for licensure. Forty-nine of these were graduates of accredited American medical schools and only two failed to pass, a passing average of 95.9 percent. The remainder of the medical applicants was the product of foreign medical schools, 66 in number, and only 63.6 percent of these passed.

Forty osteopaths took the examination and 85 percent passed. All of these osteopaths had previously been licensed to practice osteopathy in New Jersey under limited licenses, were examined only in the subjects of pharmacology, therapeutics and surgery and each had taken a special postgraduate course of 2 years to qualify them to take the examination for a license to practice medicine and surgery. To infer, therefore, that this particular examination reflected the general professional qualifications of osteopaths or offered an adequate comparison between the ability of osteopaths and doctors of medicine is to predicate a position on an unstable, misleading foundation.

The chairman of the department of public relations of the American Osteopathic Association further stated, with respect to New Jersey, that the State makes its own examination of professional schools and has examined and approved osteopathic colleges as institutions possessing the training facilities and other requirements necessary to equip and qualify practitioners of the healing art in all its branches. He neglected to state that the State recognizes only two osteopathic institutions, the graduates of which may qualify for an examination to practice medicine and surgery in New Jersey, the Philadelphia College of Osteopathy, and the Los Angeles College of Osteopathy. Graduates from all other osteopathic institutions cannot qualify for such an examination, including the other four schools that are accredited by the American Osteopathic Association.

The chairman of the department of public relations of the American Osteopathic Association referred in some detail to the healing arts practice act of the District of Columbia as imposing practically the same requirements on osteopathic applicants as on medical applicants. He did not inform the subcommittee that since such requirements were imposed in 1929, only nine osteopaths have been able to obtain a license to practice osteopathy and surgery in the District, four after examination and five by reciprocity. If graduates of schools of osteopathy are equally as well qualified as graduates of accredited medical schools, why should there have been so few osteopaths able to obtain licensure in the District over a period of some 15 years?

The chairman of the department of public relations of the American Osteopathic Association referred to Massachusetts as imposing equal requirements on osteopaths and doctors of medicine. In the February 24, 1944, issue of the New



England Journal of Medicine, on page 242, will be found tabulated the results of the examination given by the board of registration in medicine in Massachusetts on November 19, 1943. Sixteen osteopaths took the examination; 1 passed.

In 1943 amendatory legislation was enacted in Nebraska providing a means whereby osteopaths then practicing in the State under limited licenses could by taking the regular medical examination qualify for licenses to practice medicine and surgery. Since the enactment of this legislation, one regular medical examination has been held. Twenty-one osteopaths took the examination. Only 6 passed.

So while it is true that in a limited number of States osteopaths have an opportunity to obtain unrestricted licenses by taking the same examination as do graduates of medical schools, the fact is that osteopaths meet with relatively little success in passing such examinations. To refer, therefore, to the opportunity that osteopaths have been accorded in these few States without indicating the ability of such practitioners to accept that opportunity creates an erroneous impression.

The difficulty that osteopaths have in qualifying for licensure when subjected to the same tests given graduates of medical schools is exemplified by a statement included in the annual report of the executive secretary of the American Osteopathic Association, covering the fiscal year 1940-41, and published in the September 1941 issue of the Journal of the American Osteopathic Association, on page 43. The statement follows:

"The association of osteopathic examining boards, Dr. Lester R. Daniels, secretary, reports in addition to the above licensure statistics that 56 percent of examinations taken before composite boards were passed by osteopathic physicians, and 99.4 percent of examinations taken by osteopathic physicians before boards consisting of doctors of osteopathy were passed."

This statement means that in the States in which osteopaths were required to take practically the same examination as doctors of medicine are required to take, then only 56 percent of the osteopathic applicants are successful. On the other hand, when osteopaths are examined by osteopaths and are subjected to examinations differing from those given to doctors of medicine, then only 0.6 percent fail. During 1940, of the 5,188 graduates of approved medical schools in the United States who were examined, only 5.1 percent failed. The year 1940 has been selected so as to contrast the percentage of failures of graduates of approved medical schools with the percentage of failures of graduates of osteopathic schools who were examined by medical boards or by composite boards.

In a number of States basic science laws have been enacted which undertake to impose on all applicants for licenses to practice the healing art in any form a requirement that they be proficient in certain basic sciences, such as anatomy, physiology, chemistry, bacteriology, and pathology. These examinations are conducted, in the main, by nonsectarian examining boards. From 1927 to 1940, inclusive, 742 osteopaths undertook to pass basic science examinations, and only 59 percent were successful. During the same period 11,814 students or graduates of medical schools attempted to pass such examinations, and 88 percent succeeded. If osteopaths were as equally schooled in the sciences that are basic to every form of healing, as are doctors of medicine, then it seems obvious that the former should have no more difficulty in passing the basic science examinations than the latter.

The Surgeon General of the Navy, Vice Admiral McIntire, recently testified before the House Committee on Appropriations in the hearing conducted on the Navy Department appropriation bill for 1944 that osteopaths do not at the present time "meet the requirements of medical officers in time of war." After calling attention in a prepared statement to the fact that most osteopaths are authorized to practice a limited form of healing without the use of drugs generally and without the right to practice major surgery, he stated:

"To attempt to treat pneumonia, diphtheria, syphilis, or other contagious diseases, acute appendicitis, ruptured ulcer, renal colic, compound fractures, and many other pathological conditions which are not uncommon among men of the Navy, by osteopathic methods, could but lead to disastrous results" (House hearings, Navy Department appropriation bill for 1944, p. 253).

The prepared statement concludes in the following language:

"It is not considered to be to the best interests of the naval service to commission in the Medical Corps of the Navy physicians who are not fully trained and qualified to serve on independent duty. It is of paramount importance that the Medical Corps of the Navy be composed of medical officers who have received the best available medical training and who are qualified to render the highest



accepted standards of treatment to naval and Marine Corps personnel" (House hearings, Navy Department appropriation bill for 1944, p. 253).

On another occasion, before the same committee, the Surgeon General of the Navy said:

"One of the schools [osteopathic] is really quite good. They lack in two regards, and in that we are telling them where their graduates will have to bring themselves up to a certain point. I have made some very definite suggestions to them as to how they can do these things, and they have turned me down on my proposition. I asked them to let us have some of their graduates to bring in so that we could try them out in internships to see what they can do. We have gotten nowhere. Where they fall down is in preventive medicine. That applies to the sending of doctors out into the field, into the Solomons, for instance. I always say a good doctor has a small sick list. No commanding officer wants many sick men on board. No man who is operating in the field wants a lot of sick men who are going to immobilize him. What I am trying to show these people is the fact that they must approach the whole plan from the preventive side, not wait until a man gets sick and then cure him. Now, that is the trouble with osteopaths, as I find them. We are putting our cards right on the table, because I realize they have spent a lot of time in their schools, and they are American citizens, and they have a right to consideration, but we are fighting a war, and we have got to have medical officers in the naval service, and, I think, the Army as well. When I send a man out on independent duty I have got to know that man can discharge all of his duties. I am not going to let anybody go out if I know that he lacks something professionally. He may not stick, and he may not do what I want done, but it will not be because he did not have the ground work in the beginning" (House hearings, supplemental Navy Department appropriation bill for 1943, p. 444).

Osteopaths are not now accepted as medical officers in the Navy. Officers in the United States Public Health Service, in time of war, are called on to function in association with the armed forces and certainly it is desirable that the quality of officers in the service should not be lower than the quality of officers with whom they have to collaborate in the war effort.

The chairman of the department of public relations of the American Osteopathic Association testified, in answer to a question, that he thought osteopaths are licensed to practice major surgery in about 40 States. He promised to submit for the record authentic information about the matter. Accompanying this statement is a memorandum summarizing the laws of the several States relating to osteopathy insofar as they indicate the scope within which osteopaths may practice. These laws present a confused picture, almost defying generalization. They do not, however, support an unqualified claim that all osteopaths in 40 States may practice major surgery. The situation with respect to the practice of surgery by osteopaths seems to be as follows:

In four States—Alabama, Minnesota, North Dakota, and South Dakota—osteopaths are by statute denied the right to practice major surgery, and no provisions obtain whereby that right may be secured.

In three other States, Louisiana, Maryland, and New York, osteopaths are generally denied the right to utilize any operative surgery. In New York, however, they may by complying with certain requirements obtain the right to use surgical instruments for minor surgical procedures.

In five States, California, Connecticut, Illinois, New Jersey, and Virginia, osteopaths are generally denied the right to use any surgery, but specific statutory provisions obtain whereby the right to utilize surgery may be secured. Possibly Michigan should be in this classification.

In seven States, Arizona, Arkansas, Montana, Nebraska, Ohio, Pennsylvania, and Rhode Island, osteopaths are denied generally the right to practice major or operative surgery, but there are provisions under which that right may be obtained if osteopaths meet certain additional requirements.

In four States, Iowa, Oklahoma, Utah, and Washington, two types of licenses are issued: (1) To practice osteopathy; and (2) to practice osteopathy and surgery. Osteopaths holding licenses to practice osteopathy may not practice major surgery in Iowa and Oklahoma, operative surgery in Utah, or any type of surgery in Washington.

In 16 States, Colorado, District of Columbia, Florida, Indiana, Kentucky, Massachusetts, Maine, Nevada, New Hampshire, Oregon, South Carolina (minor surgery), Tennessee, Texas, West Virginia, Wisconsin, and Wyoming, all osteopaths who receive their licenses at the present time are apparently authorized

by statute to practice surgery. In Maine, however, the right to practice major surgery is subject to the qualifications specifically noted in the Maine act.

In four States, Delaware, Idaho, Mississippi, and Vermont, osteopathic applicants are merely licensed to practice osteopathy, without any definition of that term. Wherever the courts have been called on to define the term "osteopathy," they have held it to mean a method of practice without the use of drugs or operative surgery.

In the remaining States, Georgia, Kansas, Missouri, New Mexico, and North Carolina, osteopaths are licensed to practice in accordance with the type of practice taught in recognized colleges of osteopathy. In two more or less recent court decisions, *State ex rel. Beck, Attorney General, v. Glicason* (Kans.), 79 P. (2d) 911, and *State v. Wagner* (Nebr.), 297 N. W. 906, it was held that when a statute authorizes an osteopath to practice as taught and practiced in recognized schools of osteopathy no right was conferred on the licensee to practice operative surgery.

The foregoing summary, it is believed, is factually correct. It illustrates the rashness of general statements such as made by the chairman of the department of public relations of the American Osteopathic Association. The fact that osteopaths may obtain the right to do surgery carries with it no implication that osteopaths in a particular State have actually acquired that right. The distinction between an opportunity afforded and a right acquired is a basic one that must be kept constantly in mind when construing osteopathic licensure laws.

Another witness before the subcommittee, a professor of pathology of the Philadelphia College of Osteopathy, presented testimony concerning the type of instruction offered in the college he represented. He offered for the record certain tables showing the relative curricula of all osteopathic schools, of the Harvard Medical School, of the University of Kansas, and of Stanford University. The apparent objective in submitting these data for the record was to support a contention that the quality of instruction offered in osteopathic schools is on a par with the quality of instruction given in medical schools and that therefore the graduates therefrom should be given equal recognition by the United States Public Health Service.

Assuming that the same subjects may be taught in osteopathic schools as are taught in medical schools, that the same textbooks were used, and that the same number of class hours are devoted to each subject, such facts do not support a claim of equality of quality of instruction. There appeared in the Journal of the American Osteopathic Association for October 1942, a discussion under the heading "Standardization of the osteopathic curriculum," by J. M. Peach, D. O., dean of the Kansas City College of Osteopathy and Surgery. Dean Peach was at one time president of the Associated Colleges of Osteopathy. As a part of his article, Dean Peach included a table showing the relative number of hours of instruction given in osteopathic schools and the Harvard Medical School, the University of Kansas Medical School, and the Stanford University School of Medicine, a table similar to the one introduced in the record in connection with the hearing on H. R. 3379. There is reproduced below the concluding paragraph of Dean Peach's discussion:

"It will be noted that the curricular content of the various approved colleges of osteopathy conform quite closely to the recommended standard. There is no greater variation between the content of our colleges than exists between the curricular content of the approved medical colleges that were studied. \* \* \* It appears to the writer that the true test of the curriculum of an institution is not to be found in a consideration of the 'hours' devoted, within reasonable limits, but to the effectiveness of the educational program, the competency of the faculty and the capability and enthusiasm of the students."

Even assuming that the six osteopathic schools that are now accredited by the American Osteopathic Association have adopted a standard curriculum practically identical with the standard curriculum adopted by accredited medical schools, it cannot be concluded that the quality of instruction given in the two types of schools is on a par. The experience of osteopaths before State basic science boards and before State examining boards composed of doctors of medicine and doctors of osteopathy, as previously indicated, presents evidence leading to a contrary conclusion.

The National Research Council of the National Academy of Sciences has agreed to make an impartial comparative study of the quality of instruction offered in the accredited medical and osteopathic schools. This study has been delayed, it is understood, because of a disinclination on the part of the osteopaths to collaborate in the project. The purpose of the study was to develop current



information on which to predicate determinations as to the extent to which Federal recognition of osteopathy is justified. If, as inferred by the witness who represented the Philadelphia College of Osteopathy, the quality of instruction in osteopathic schools is on a par with the quality of instruction in medical schools, it is somewhat difficult to understand the reaction of the osteopaths against the proposed study. It would seem that a study at this time would be welcomed by the osteopaths.

About 8 or 9 years ago, the College of Physicians and Surgeons of Ontario delegated two representatives to visit some of the leading osteopathic schools in the United States. Osteopaths were then seeking additional rights in Ontario and this investigation was made to determine their qualifications to exercise the additional rights they sought. One of the representatives of the college so deputized, Dr. Frederick Etherington, summarized his findings in a paper that he read before the Annual Congress on Medical Education, Hospitals and Licensure, which met in Chicago, February 18 and 19, 1935. Here are Dr. Etherington's conclusions:

"For the purpose of appraising the character, quality, and value of the work done in schools of osteopathy, Dr. E. Stanley Ryerson, and I visited four of the leading centers.

"Our conclusions were as follows:

"1. The buildings, plant, and equipment of the four colleges visited do not provide the facilities necessary for the training of students destined to practice any general system of the healing art.

"2. Hospital and clinical facilities are inadequate.

"3. Requirements for admission and the length of courses fall far below the standards maintained by the facilities of medicine of Ontario.

"4. The curriculums and courses of study are so different from our own in their quality and fundamental principles of instruction that they could not in any sense be recognized as equivalent.

"5. The scientific training and clinical experience of the teaching staffs are not of a quality or character to warrant their courses being accepted as fulfilling the requirements of the College of Physicians and Surgeons of Ontario.

"6. As a result of our visit and after an inspection of their buildings, plants, and equipment, their hospital and clinical facilities, their requirements for admission and their curriculums, after attending some of their lectures, laboratory classes, and clinics, and bearing in mind the lack throughout the course of any adequate bedside teaching, we are firmly convinced that it would be against public interest and welfare to admit the graduates of these schools, past or present, to the Ontario licensure examinations."

A reprint of the Etherington paper accompanies this statement. That investigation, of course, reflected conditions at the time it was made. Graduates from schools such as described by Dr. Etherington, however, will be entitled to the benefits of legislation authorizing the appointment of osteopaths in the United States Public Health Service. Can Congress conclude that such graduates are professionally competent to function as Service officers?

Lines 15-17, page 18, of H. R. 3379 should be stricken from the bill. They read:

"No regulation relating to qualifications for appointment of medical officers or employees shall give preference to any school of medicine."

The Public Health Service should not be prohibited from establishing adequate standards even though such standards may bar from appointment in the Service adherents of schools of the healing art whose educational background prevents them from meeting the standards established.

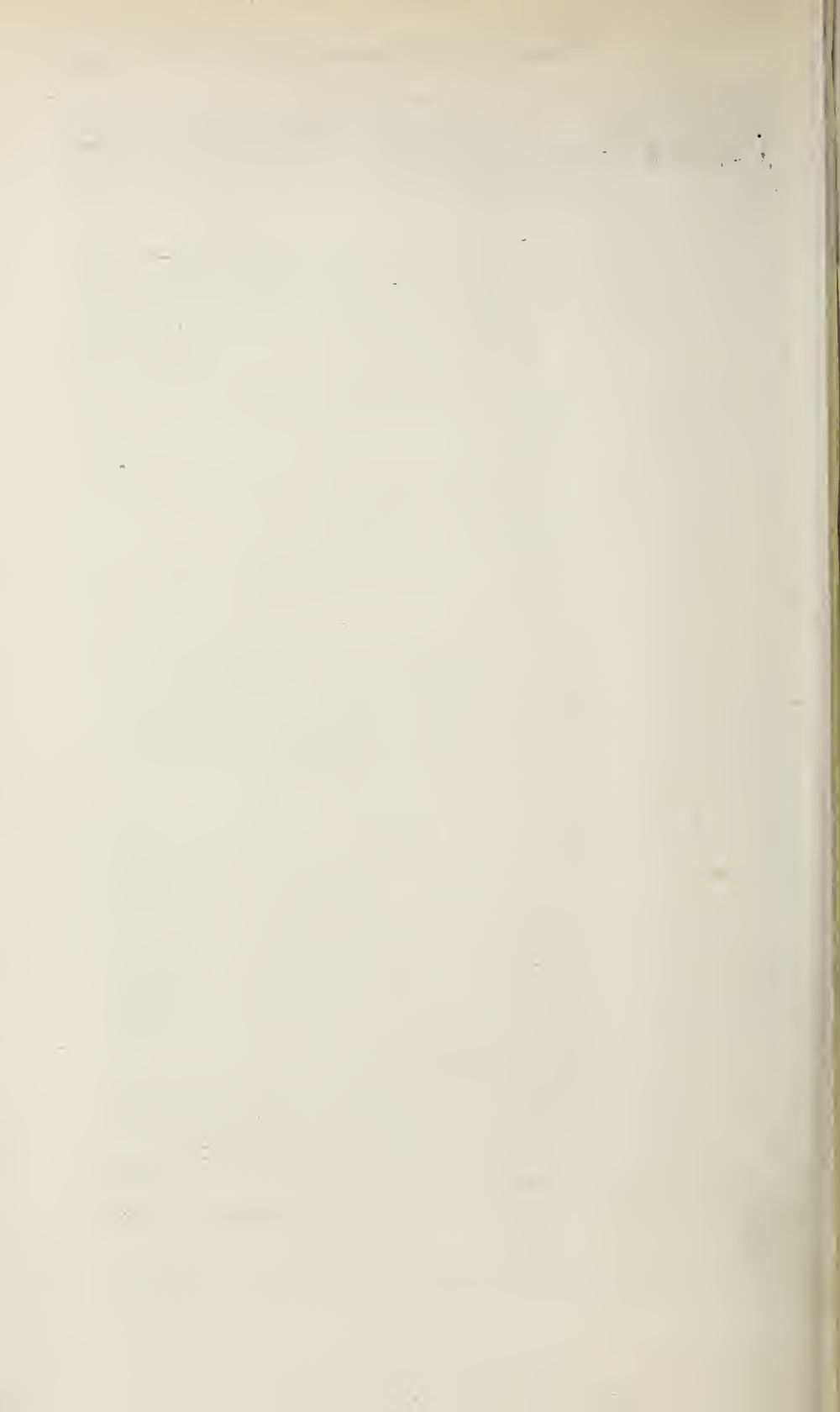
It will not be in the interest of public health to include in H. R. 3379 any language giving recognition to any form of sectarian healing.

The United States Public Health Service constitutes an important branch of the Federal Government, particularly important in time of war. It will be most unfortunate if the quality of service rendered by it should become diluted because of the infiltration of officers and employees having inferior qualifications.

**Mr. BULWINKLE.** Is there anything further? If not, the committee will stand adjourned as above indicated.

(Thereupon, at 10:30 a. m., the subcommittee adjourned as above indicated.)





11. 11. 1880

Dear Sir,

I have the honor to acknowledge the receipt of your letter of the 10th inst.

and in reply to inform you that the same has been forwarded to the proper authorities.

I am, Sir, very respectfully,  
Your obedient servant,  
J. H. [Signature]





78TH CONGRESS  
2D SESSION

# H. R. 4624

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## IN THE HOUSE OF REPRESENTATIVES

APRIL 18, 1944

Mr. BULWINKLE introduced the following bill; which was referred to the Committee on Interstate and Foreign Commerce

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## A BILL

To consolidate and revise the laws relating to the Public Health Service, and for other purposes.

1      *Be it enacted by the Senate and House of Representa-*  
2      *tives of the United States of America in Congress assembled,*

### 3      TITLE I—SHORT TITLE AND DEFINITIONS

#### 4                                      SHORT TITLE

5      SECTION 1. Titles I to V, inclusive, of this Act may be  
6      cited as the "Public Health Service Act".

#### 7                                      DEFINITIONS

8      SEC. 2. When used in this Act—

9      (a) The term "Service" means the Public Health  
10     Service;

1           (b) The term "Surgeon General" means the Surgeon  
2 General of the Public Health Service;

3           (c) The term "Administrator" means the Federal Se-  
4 curity Administrator;

5           (d) The term "regulations", except when otherwise  
6 specified, means rules and regulations made by the Surgeon  
7 General with the approval of the Administrator;

8           (e) The term "executive department" means any execu-  
9 tive department, agency, or independent establishment of  
10 the United States or any corporation wholly owned by the  
11 United States;

12           (f) The term "State" means a State or the District of  
13 Columbia, Hawaii, Alaska, Puerto Rico, or the Virgin  
14 Islands, except that as used in section 361 (d) such term  
15 means a State, the District of Columbia, or Alaska;

16           (g) The term "possession" includes, among other pos-  
17 sessions, Puerto Rico and the Virgin Islands;

18           (h) The term "seamen" includes any person employed  
19 on board primarily in the care, preservation, or navigation  
20 of any vessel, or in the service, on board, of those engaged  
21 in such care, preservation, or navigation;

22           (i) The term "vessel" includes every description of  
23 watercraft or other artificial contrivance used, or capable of  
24 being used, as a means of transportation on water, exclusive  
25 of aircraft and amphibious contrivances;

(j) The term "habit-forming narcotic drug" or "narcotic" means opium and coca leaves and the several alkaloids derived therefrom, the best known of these alkaloids being morphia, heroin, and codeine, obtained from opium, and cocaine derived from the coca plant; all compounds, salts, preparations, or other derivatives obtained either from the raw material or from the various alkaloids; Indian hemp and its various derivatives, compounds, and preparations, and peyote in its various forms; and

(k) The term "addict" means any person who habitually uses any habit-forming narcotic drug so as to endanger the public morals, health, safety, or welfare, or who is or has been so far addicted to the use of such habit-forming narcotic drugs as to have lost the power of self-control with reference to his addiction.

## TITLE II—ADMINISTRATION

### PUBLIC HEALTH SERVICE

SEC. 201. The Public Health Service in the Federal Security Agency shall be administered by the Surgeon General under the supervision and direction of the Administrator.

### ORGANIZATION

SEC. 202. The Service shall consist of (1) the Office of the Surgeon General, (2) the National Institute of Health, (3) the Bureau of Medical Services, and (4) the Bureau of State Services. The Surgeon General is authorized and di-



1 rected to assign to the Office of the Surgeon General, to  
2 the National Institute of Health, to the Bureau of Medical  
3 Services, and to the Bureau of State Services, respectively,  
4 the several functions of the Service, and to establish within  
5 them such divisions, sections, and other units as he may find  
6 necessary; and from time to time abolish, transfer, and con-  
7 solidate divisions, sections, and other units and assign their  
8 functions and personnel in such manner as he may find  
9 necessary for efficient operation of the Service. No division  
10 shall be established, abolished, or transferred, and no divisions  
11 shall be consolidated, except with the approval of the Admin-  
12 istrator. The National Institute of Health shall be adminis-  
13 tered as a part of the field service. The Surgeon General  
14 may delegate to any officer or employee of the Service such  
15 of his powers and duties under this Act, except the making  
16 of regulations, as he may deem necessary or expedient.

17 COMMISSIONED CORPS

18 SEC. 203. There shall be in the Service a commissioned  
19 Regular Corps and, for the purpose of securing a reserve  
20 for duty in the Service in time of national emergency, a  
21 Reserve Corps. All commissioned officers shall be citizens  
22 and shall be appointed without regard to the civil-service  
23 laws and compensated without regard to the Classification  
24 Act of 1923, as amended. Commissioned officers of the  
25 Reserve Corps shall be appointed by the President and

1 commissioned officers of the Regular Corps shall be ap-  
 2 pointed by him by and with the advice and consent of the  
 3 Senate. Commissioned officers of the Reserve Corps shall  
 4 at all times be subject to call to active duty by the Surgeon  
 5 General, including active duty for the purpose of training  
 6 and active duty for the purpose of determining their fitness  
 7 for appointment in the Regular Corps. All active service  
 8 in the Reserve Corps, as well as service in the Regular  
 9 Corps, shall be credited for the purpose of promotion in the  
 10 Regular Corps.

#### 11 SURGEON GENERAL

12 SEC. 204. The Surgeon General shall be appointed  
 13 from the Regular Corps for a four-year term by the Presi-  
 14 dent by and with the advice and consent of the Senate.  
 15 Upon the expiration of such term the Surgeon General,  
 16 unless reappointed, shall revert to the grade and number in  
 17 the Regular Corps that he would have occupied had he not  
 18 served as Surgeon General.

#### 19 DEPUTY SURGEON GENERAL AND ASSISTANT SURGEONS

#### 20 GENERAL

21 SEC. 205. (a) The Surgeon General shall assign one  
 22 commissioned officer from the Regular Corps to administer  
 23 the Office of the Surgeon General, to act as Surgeon General  
 24 during the absence or disability of the Surgeon General or  
 25 in the event of a vacancy in that office, and to perform such

1 other duties as the Surgeon General may prescribe, and while  
2 so assigned he shall have the title of Deputy Surgeon General.

3 (b) The Surgeon General shall assign six commissioned  
4 officers from the Regular Corps to be, respectively, the  
5 Director of the National Institute of Health, the Chief of the  
6 Bureau of State Services, the Chief of the Bureau of Medical  
7 Services, the Chief Medical Officer of the United States  
8 Coast Guard, the Chief Dental Officer of the Service, and  
9 the Chief Sanitary Engineering Officer of the Service, and  
10 while so serving they shall each have the title of Assistant  
11 Surgeon General.

12 (c) The Surgeon General shall designate the Assistant  
13 Surgeon General who shall serve as Surgeon General in case  
14 of absence or disability, or vacancy in the offices, of both the  
15 Surgeon General and the Deputy Surgeon General.

16 GRADES, RANKS, AND TITLES OF THE COMMISSIONED CORPS

17 SEC. 206. (a) The Surgeon General, during the period  
18 of his appointment as such, shall be of the same grade, with  
19 the same pay and allowances, as the Surgeon General of the  
20 Army; and the Deputy Surgeon General and Assistant Sur-  
21 geons General, while assigned as such, shall have the grade  
22 corresponding with the grade of Brigadier General, with  
23 the same pay and allowances. The grades of commissioned  
24 officers of the Service shall correspond with grades of officers  
25 of the Army as follows:



- 1           (1) Officers of the director grade—colonel;
- 2           (2) Officers of the senior grade—lieutenant colonel;
- 3           (3) Officers of the full grade—major;
- 4           (4) Officers of the senior assistant grade—captain;
- 5           (5) Officers of the assistant grade—first lieutenant;
- 6           and
- 7           (6) Officers of the junior assistant grade—second
- 8           lieutenant.

9           (b) The titles of medical officers of the foregoing grades  
 10 shall be respectively (1) medical director, (2) senior sur-  
 11 geon, (3) surgeon, (4) senior assistant surgeon, (5)  
 12 assistant surgeon, and (6) junior assistant surgeon. The  
 13 President is authorized to prescribe titles, appropriate to the  
 14 several grades, for commissioned officers of the Service other  
 15 than medical officers. All titles of the officers of the Reserve  
 16 Corps shall have the suffix "Reserve".

#### 17                   SPECIAL TEMPORARY POSITIONS

18           SEC. 207. (a) When necessary for the accomplishment  
 19 of important temporary work in time of war, or of emergency  
 20 proclaimed by him, the President may establish special tem-  
 21 porary positions in the Service and prescribe grades which  
 22 shall be applicable to officers during periods they are as-  
 23 signed to such positions. While assigned to any such posi-  
 24 tion an officer shall receive the pay and allowances applicable  
 25 to the grade so prescribed. Not more than three such posi-

1 tions existing at any one time shall have the grade of  
2 Assistant Surgeon General. The Surgeon General shall  
3 assign commissioned officers to such positions.

4 (b) Commissioned officers and qualified technical or  
5 professional noncommissioned personnel may be assigned by  
6 the Surgeon General to be chiefs of administrative units.  
7 Such assignments shall not affect the pay of commissioned  
8 officers so assigned, except that when any commissioned  
9 officer below the grade of director is assigned to serve as  
10 chief of a division such officer during the period so assigned  
11 shall have the temporary grade and receive the pay and  
12 allowances applicable to the director grade.

13 APPOINTMENT OF PERSONNEL

14 SEC. 208. (a) (1) Except as provided in subsection  
15 (b) of this section, original appointments to the Regular  
16 Corps may be made only in the junior assistant, assistant,  
17 and senior assistant grades and original appointments to a  
18 grade above junior assistant shall be made only after passage  
19 of an examination, given in accordance with regulations of  
20 the President, in one or more of the several branches of  
21 medicine, surgery, dentistry, hygiene, sanitary engineering,  
22 pharmacy, or related scientific specialties in the field of public  
23 health.

24 (2) Original appointments to the Reserve Corps may  
25 be made to any grade up to and including the director grade

1 but only after passage of an examination given in accordance  
2 with regulations of the President. Reserve commissions shall  
3 be for a period of not more than five years and any such com-  
4 mission may be terminated by the President at any time,  
5 in his discretion.

6 (b) Whenever commissioned officers of the Service are  
7 not available for the performance of permanent duties re-  
8 quiring highly specialized training and experience in special  
9 fields related to public health, the Administrator on recom-  
10 mendation of the Surgeon General shall report that fact to  
11 the President and the President is authorized to appoint, by  
12 and with the advice and consent of the Senate, not to exceed  
13 three persons in any one fiscal year to grades in the Regular  
14 Corps of the Service above that of senior assistant, but not  
15 to a grade above that of director; and for purposes of pay and  
16 pay period any person appointed under the provisions of this  
17 section shall be considered as having had on the date of ap-  
18 pointment service equal to that of the junior officer of the  
19 grade to which appointed.

20 (c) In accordance with regulations, special consultants  
21 may be employed to assist and advise in the operations of the  
22 Service. Such consultants may be appointed without regard  
23 to the civil-service laws and their compensation may be fixed  
24 without regard to the Classification Act of 1923, as amended.

25 (d) In accordance with regulations, individual scientists,



1 other than commissioned officers of the Service, may be des-  
2 ignated by the Surgeon General to receive fellowships, ap-  
3 pointed for duty with the Service without regard to the  
4 civil-service laws and compensated without regard to the  
5 Classification Act of 1923, as amended, may hold their fel-  
6 lowships under conditions prescribed therein, and may be  
7 assigned for studies or investigations either in this country  
8 or abroad during the terms of their fellowships.

9 (e) Persons who are not citizens may be employed as  
10 consultants pursuant to subsection (c) and may be appointed  
11 to fellowships pursuant to subsection (d). Unless other-  
12 wise specifically provided, any prohibition in any other Act  
13 against the employment of aliens, or against the payment  
14 of compensation to them, shall not be applicable in the case  
15 of persons employed or appointed pursuant to such subsec-  
16 tions.

17 (f) The appointment of any officer or employee of the  
18 Service made in accordance with the civil-service laws shall  
19 be made by the Administrator, and may be made effective  
20 as of the date on which such officer or employee enters upon  
21 duty.

## 22 PAY AND ALLOWANCES

23 SEC. 209. (a) Commissioned officers of the Regular  
24 Corps shall receive such pay and allowances as are or may  
25 hereafter be provided by law.

1 (b) Reserve officers shall receive the same pay and  
2 allowances when on active duty as commissioned officers of  
3 the Regular Corps, including allowances for travel and trans-  
4 portation of household goods and effects.

5 (c) In accordance with regulations of the President,  
6 commissioned officers of the Regular Corps and officers of  
7 the Reserve on active duty may make allotments from their  
8 pay and may be granted leaves of absence without any de-  
9 duction from their pay. Such officers shall also be permitted  
10 to purchase quartermaster supplies from the Army, Navy,  
11 and Marine Corps at the same price as is charged officers  
12 of the Army, Navy, and Marine Corps.

13 (d) Female commissioned officers of the Service shall  
14 receive the same pay and allowances as male officers of  
15 corresponding grades, including allowances for dependents,  
16 except that no allowance shall be paid to any female com-  
17 missioned officer on account of any dependent who is not in  
18 fact dependent upon such officer for his or her chief sup-  
19 port. For the purposes of this subsection the term "depend-  
20 ent" shall include a husband, father, mother, and unmarried  
21 children (including stepchildren and adopted children)  
22 under twenty-one years of age.

23 (e) Members of the National Advisory Health Council  
24 and members of the National Advisory Cancer Council, other  
25 than ex officio members, while attending conferences or

1 meetings of their respective Councils or while otherwise serv-  
2 ing at the request of the Surgeon General, shall be entitled  
3 to receive compensation at a rate to be fixed by the Adminis-  
4 trator, but not exceeding \$25 per diem, and shall also be  
5 entitled to receive an allowance for actual and necessary  
6 traveling and subsistence expenses while so serving away  
7 from their places of residence.

8 (f) Field employees of the Service, except those em-  
9 ployed on a per diem or fee basis, who render part-time duty  
10 and are also subject to call at any time for services not  
11 contemplated in their regular part-time employment,  
12 may be paid annual compensation for such part-time duty  
13 and, in addition, such fees for such other services as the  
14 Surgeon General may determine; but in no case shall the  
15 total paid to any such employee for any fiscal year exceed  
16 the amount of the minimum annual salary rate of the classifi-  
17 cation grade of the employee.

18 (g) Whenever any commissioned or other officer or  
19 employee of the Service is assigned for duty which the  
20 Surgeon General finds requires intimate contact with persons  
21 afflicted with leprosy, he may receive, as provided by regula-  
22 tions of the President, in addition to the pay and any allow-  
23 ances of his grade, not more than one-half the pay of  
24 such grade, and such allowances or increased allowances  
25 as may be provided for by such regulations.



(h) Individuals appointed under section 208 (d) shall have included in their fellowships such stipends or allowances, including travel and subsistence expenses, as the Surgeon General may deem necessary to procure qualified fellows.

PROMOTIONS AND SEPARATION OF COMMISSIONED OFFICERS

IN THE REGULAR CORPS

SEC. 210. (a) Promotions of commissioned officers of the Regular Corps to any grade up to and including the director grade shall be made only after examination given in accordance with regulations of the President and shall be made according to the same length of service as is now or may hereafter be prescribed for promotion of officers of corresponding grades of the Medical Corps of the Army, except that—

(1) In time of war, or of national emergency proclaimed by the President, any commissioned officer of the Regular Corps may be appointed to a higher temporary grade with the pay and allowances thereof without examination and without vacating his permanent appointment, and, if his service shall have been continuous, without renewing his oath of office;

(2) For purposes of promotion, an officer whose original appointment to the Regular Corps was above the assistant grade shall be considered as having had on the date of such original appointment service equal to that of the junior officer of the grade to which he was

1 appointed, except that if his active commissioned service  
2 in the Service exceeds that of the junior officer of the  
3 grade, such service (not exceeding ten years for an  
4 officer appointed in the senior assistant grade and four-  
5 teen years for an officer appointed in the full grade)  
6 shall be credited for purposes of promotion;

7 (3) Officers commissioned in the grade of junior  
8 assistant shall be examined for promotion after not more  
9 than two years of service and if qualified shall be pro-  
10 moted to the next higher grade; and

11 (4) Commissioned officers other than medical,  
12 dental, and sanitary engineering officers shall be pro-  
13 moted in accordance with regulations of the President.

14 (b) At the end of his first three years of service, the  
15 record of each commissioned officer in the Regular Corps  
16 originally appointed in or above the grade of senior assistant  
17 shall be reviewed in accordance with regulations of the  
18 President and if found not fully qualified for further service  
19 he shall be separated from the Service and paid six months'  
20 pay and allowances.

21 (c) When a commissioned officer in the Regular Corps  
22 is found, after examination, to be not qualified for promo-  
23 tion for reasons other than physical disability incurred in  
24 line of duty—

25 (1) If below the full grade he shall be separated

1 from the Service, and if in the assistant grade he shall  
2 be separated and paid six months' pay and allowances,  
3 and if in the senior assistant grade he shall be separated  
4 and paid one year's pay and allowances; and

5 (2) If in the full or senior grade he shall be reported  
6 as not in line of promotion, or shall be retired and paid  
7 at the rate of  $2\frac{1}{2}$  per centum for each complete year of  
8 active commissioned service in the Service, but in no  
9 case to exceed 60 per centum of his active pay at the  
10 time he is retired.

11 RETIREMENT OF COMMISSIONED OFFICERS

12 SEC. 211. (a) A commissioned officer of the Regular  
13 Corps retired for disability from disease or injury incurred  
14 in line of duty, or a commissioned officer of the Reserve  
15 Corps retired for disability from disease or injury incurred  
16 in line of duty in time of war, shall be entitled, except as  
17 provided in subsection (c), to receive retired pay at the  
18 rate of 75 per centum of his active pay at the time of  
19 retirement.

20 (b) A commissioned officer shall be retired on the first  
21 day of the month following his sixty-fourth birthday. If he  
22 is an officer in the Regular Corps, he shall, except as pro-  
23 vided in subsection (c), be entitled to receive retired pay  
24 at the rate of 75 per centum of his active pay at the time of  
25 retirement.



1       (c) (1) Any commissioned officer of the Regular  
2 Corps who at the time of his original appointment was more  
3 than forty-five years of age shall upon retirement, unless  
4 retired for disability from disease or injury incurred in time  
5 of war, be entitled to retired pay only at the rate of 4 per  
6 centum of his active pay at the time of retirement for each  
7 twelve months of active commissioned service, including  
8 any such service in the Army, Navy, or Coast Guard, but  
9 in no case more than 75 per centum of such active pay.

10       (2) The retired pay of any commissioned officer who  
11 has served four years or more as Surgeon General or Deputy  
12 Surgeon General shall be based on the pay of the highest  
13 grade held by him as such Surgeon General or Deputy  
14 Surgeon General.

15       (3) The retired pay of an officer of the Regular Corps  
16 who has failed, by reason of disability incurred in line of duty,  
17 to receive a promotion to which he would otherwise have  
18 been entitled, shall be based on the pay of the grade to which,  
19 but for such disability, he would have been promoted.

20       (d) An officer retired for disability who is found to have  
21 recovered from his disability, and in time of war an officer  
22 who has been retired for age, may in accordance with regula-  
23 tions of the President be recalled to active duty.

24       (e) With the approval of the President a commissioned  
25 officer who has served four years or more as Surgeon General

1 and who has had not less than twenty-five years of active  
2 commissioned service in the Service may retire voluntarily,  
3 either at the termination of his term as Surgeon General or  
4 at any time thereafter; and his retired pay shall be at the  
5 rate of 75 per centum of the pay of the highest grade held  
6 by him as such Surgeon General.

7 (f) Commissioned officers of the Reserve Corps, while on  
8 active duty, shall be deemed to be officers of the executive  
9 branch of the Government within the meaning of section 3  
10 of the Civil Service Retirement Act, as amended (U. S. C.,  
11 1940 edition, title 5, section 693).

#### 12 MILITARY BENEFITS

13 SEC. 212. (a) For the purposes of this section—

14 (1) the term "full military benefits" means all  
15 rights, privileges, immunities, and benefits provided  
16 under any law of the United States in the case of  
17 commissioned officers of the Army (including their sur-  
18 viving beneficiaries) on account of active military  
19 service, including, but not limited to, burial payments  
20 in the event of death, six months' pay in case of death,  
21 veterans' compensation and pensions and other veterans'  
22 benefits, the rights provided under the Soldiers' and  
23 Sailors' Civil Relief Act, as amended, and under the  
24 National Service Life Insurance Act, as amended, travel

1 allowances, including per diem allowances for travel  
2 without regard to repeated travel between two or more  
3 places in the same vicinity; exemption from payment  
4 of postage on mail, exemption of certain pay  
5 from Federal income taxation, and other benefits,  
6 privileges and exceptions under the Internal Revenue  
7 laws; excluding, however, retired pay, uniform allow-  
8 ances, the right to be awarded military ribbons, medals,  
9 and decorations, and the benefits of the Mustering-out  
10 Payment Act of 1944, and excluding reemployment  
11 rights with respect to any commissioned officer of the  
12 Service except officers of the Reserve Corps called to  
13 active duty after November 11, 1943; and

14 (2) the term "limited military benefits" means  
15 full military benefits, except veterans' compensation and  
16 pensions and other veterans' benefits, and eligibility  
17 under the National Service Life Insurance Act, as  
18 amended.

19 (b) Commissioned officers of the Service (including  
20 their surviving beneficiaries) —

21 (1) shall be entitled to limited military benefits  
22 with respect to all active service in time of war;

23 (2) shall be entitled to full military benefits with  
24 respect to active service performed while detailed for  
25 duty with the Army, Navy, or Coast Guard;



(3) shall be entitled to full military benefits with respect to active service outside the continental limits of the United States, or in Alaska, in time of war;

(4) shall be entitled to full military benefits with respect to active service performed while the Service is part of the military forces of the United States pursuant to executive order of the President.

(c) The authority vested by law in the War Department, the Secretary of War, or other officers of the War Department with respect to rights, privileges, immunities, and benefits referred to in subsection (a) shall be exercised, with respect to commissioned officers of the Service, by the Surgeon General under the supervision and direction of the Administrator.

(d) The President may prescribe the conditions under which commissioned officers of the Service may be awarded military ribbons, medals, and decorations.

#### ALLOWANCES FOR UNIFORMS

SEC. 213. An allowance of \$250 for uniforms and equipment is authorized to be paid to each commissioned officer of the Service who is hereafter, in time of war, appointed to the Regular Corps or called to active duty in the Reserve Corps, or who is hereafter on active duty in either corps at the commencement of any war, if at such time the officer is in the grade of junior assistant, assistant, or senior assistant,

1 and is receiving the pay of the first, second, or third pay  
2 period; except that no officer who has received such an  
3 allowance from the Service shall at any time thereafter be  
4 entitled to any further allowance.

## DETAIL OF PERSONNEL

6        SEC. 214. (a) The Administrator is authorized, upon  
7 the request of the head of an executive department, to de-  
8 tail officers or employees of the Service to such department  
9 for duty as agreed upon by the Administrator and the head  
10 of such department in order to cooperate in, or conduct  
11 work related to, the functions of such department or of the  
12 Service. When officers or employees are so detailed their  
13 salaries and allowances may be paid from working funds  
14 established as provided by law or may be paid by the Service  
15 from applicable appropriations and reimbursement may be  
16 made as agreed upon by the Administrator and the head of  
17 the executive department concerned. Officers detailed for  
18 duty with the Army, Navy, or Coast Guard shall be sub-  
19 ject to the laws for the government of the service to which  
20 detailed.

(b) Upon the request of any State health authority, personnel of the Service may be detailed by the Surgeon General for the purpose of assisting such State or a political subdivision thereof in work related to the functions of the Service.

(c) The Surgeon General may detail personnel of the Service to nonprofit educational, research, or other institutions engaged in health activities for special studies of scientific problems and for the dissemination of information relating to public health.

(d) Personnel detailed under subsections (b) and (c) shall be paid from applicable appropriations of the Service, except that, in accordance with regulations such personnel may be placed on leave without pay and paid by the State, subdivision, or institution to which they are detailed. The services of personnel while detailed pursuant to this section shall be considered as having been performed in the Service for purposes of longevity pay, promotion, retirement, compensation for injury or death, and the benefits provided by section 212.

## REGULATIONS

SEC. 215. (a) The President shall from time to time prescribe regulations with respect to the appointment, promotion, retirement, termination of commission, titles, pay, uniforms, allowances (including increased allowances for foreign service), and discipline of the commissioned corps of the Service.

(b) The Surgeon General, with the approval of the Administrator, unless specifically otherwise provided, shall promulgate all other regulations necessary to the administra-



1 tion of the Service, including regulations with respect to  
2 travel, transportation of household goods and effects, allot-  
3 ments from their pay by commissioned officers, and uniforms  
4 for employees, and regulations with respect to the custody,  
5 use, and preservation of the records, papers, and property  
6 of the Service.

7 (c) No regulation relating to qualifications for appoint-  
8 ment of medical officers or employees shall give preference to  
9 any school of medicine.

10 USE OF SERVICE IN EMERGENCY

11 SEC. 216. In time of war, or of emergency pro-  
12 claimed by the President, he may utilize the Service to such  
13 extent and in such manner as shall in his judgment promote  
14 the public interest, and in time of war he may by Executive  
15 order declare the commissioned corps of the Service to be a  
16 military service. Upon such declaration, and during the  
17 period of such war or such part thereof as the President shall  
18 prescribe, the commissioned corps (1) shall constitute a  
19 branch of the land and naval forces of the United States, and  
20 (2) to the extent prescribed by regulations of the President,  
21 shall be subject to the Articles of War and to the Articles for  
22 the Government of the Navy: *Provided*, That during such  
23 period or part thereof the commissioned corps shall continue  
24 to operate as part of the Service except to the extent that the  
25 President may direct as Commander in Chief.

## 1 NATIONAL ADVISORY HEALTH AND CANCER COUNCILS

2 SEC. 217. (a) The National Advisory Health Council  
3 shall consist of fourteen members. The Director of the Na-  
4 tional Institute of Health, and three experts, one each from  
5 the Army, the Navy, and the Bureau of Animal Industry, to  
6 be detailed by the Secretary of War, the Secretary of the  
7 Navy, and the Secretary of Agriculture, respectively, shall be  
8 ex officio members of the Council. The Surgeon General,  
9 with the approval of the Administrator, shall appoint, without  
10 regard to the civil-service laws, ten members of the Coun-  
11 cil who shall be persons, not otherwise in the employ of  
12 the United States, skilled in the sciences related to health.  
13 Each appointed member shall hold office for a term of  
14 five years, except that any member appointed to fill a  
15 vacancy occurring prior to the expiration of the term for  
16 which his predecessor was appointed shall be appointed for  
17 the remainder of such term. An appointed member shall not  
18 be eligible to serve continuously for more than five years  
19 but shall be eligible for reappointment if he has not served  
20 immediately preceding his reappointment.

21 (b) The National Advisory Health Council shall advise,  
22 consult with, and make recommendations to, the Surgeon  
23 General on matters relating to health activities and functions  
24 of the Service. The Surgeon General is authorized to utilize  
25 the services of any member or members of the Council, and

1 where appropriate, any member or members of the National  
2 Advisory Cancer Council in connection with matters related  
3 to the work of the Service, for such periods, in addition to  
4 conference periods, as he may determine.

5 (c) The National Advisory Cancer Council shall consist  
6 of the Surgeon General ex officio, who shall be Chairman, and  
7 of six members to be appointed without regard to the civil-  
8 service laws by the Surgeon General with the approval of the  
9 Administrator. The six appointed members shall be selected  
10 from leading medical or scientific authorities who are out-  
11 standing in the study, diagnosis, or treatment of cancer. Each  
12 appointed member shall hold office for a term of three years,  
13 except that any member appointed to fill a vacancy occurring  
14 prior to the expiration of the term for which his predecessor  
15 was appointed shall be appointed for the remainder of such  
16 term. An appointed member shall not be eligible to serve  
17 continuously for more than three years but shall be eligible  
18 for reappointment if he has not served immediately preceding  
19 his reappointment.

20 TITLE III—GENERAL POWERS AND DUTIES OF  
21 PUBLIC HEALTH SERVICE

22 PART A—RESEARCH AND INVESTIGATIONS

23 IN GENERAL

24 SEC. 301. The Surgeon General shall conduct in the  
25 Service, and encourage, cooperate with, and render assistance

1 to other appropriate public authorities, scientific institutions,  
2 and scientists in the conduct of, and promote the coordination  
3 of, research, investigations, experiments, demonstrations, and  
4 studies relating to the causes, diagnosis, treatment, control,  
5 and prevention of physical and mental diseases and impair-  
6 ments of man, including water purification, sewage treatment,  
7 and pollution of lakes and streams. In carrying out the fore-  
8 going the Surgeon General is authorized to—

9 (a) Collect and make available through publications  
10 and other appropriate means, information as to, and the  
11 practical application of, such research and other activities;

12 (b) Make available research facilities of the Service  
13 to appropriate public authorities, and to health officials  
14 and scientists engaged in special study;

15 (c) Establish and maintain research fellowships in  
16 the Service with such stipends and allowances, including  
17 traveling and subsistence expenses, as he may deem  
18 necessary to procure the assistance of the most brilliant  
19 and promising research fellows from the United States  
20 and abroad;

21 (d) Make grants in aid to universities, hospitals,  
22 laboratories, and other public or private institutions, and  
23 to individuals for such research projects as are recom-  
24 mended by the National Advisory Health Council, or,



1 with respect to cancer, recommended by the National  
2 Advisory Cancer Council;

3 (e) Secure from time to time and for such periods  
4 as he deems advisable, the assistance and advice of  
5 experts, scholars, and consultants from the United States  
6 or abroad;

7 (f) For purposes of study, admit and treat at in-  
8 stitutions, hospitals, and stations of the Service, persons  
9 not otherwise eligible for such treatment; and

10 (g) Adopt, upon recommendation of the National  
11 Advisory Health Council, or, with respect to cancer,  
12 upon recommendation of the National Advisory Cancer  
13 Council, such additional means as he deems necessary  
14 or appropriate to carry out the purposes of this section.

15 NARCOTICS

16 SEC. 302. (a) In carrying out the purposes of section  
17 301 with respect to narcotics, the studies and investigations  
18 shall include the use and misuse of narcotic drugs, the  
19 quantities of crude opium, coca leaves, and their salts, de-  
20 rivatives, and preparations, together with reserves thereof,  
21 necessary to supply the normal and emergency medicinal  
22 and scientific requirements of the United States. The results  
23 of studies and investigations of the quantities of crude opium,  
24 coca leaves, or other narcotic drugs, together with such re-  
25 serves thereof, as are necessary to supply the normal and

1 emergency medicinal and scientific requirements of the  
2 United States, shall be reported not later than the 1st day  
3 of September each year to the Secretary of the Treasury,  
4 to be used at his discretion in determining the amounts of  
5 crude opium and coca leaves to be imported under the Nar-  
6 cotic Drugs Import and Export Act, as amended.

7 (b) The Surgeon General shall cooperate with States  
8 for the purpose of aiding them to solve their narcotic drug  
9 problems and shall give authorized representatives of the  
10 States the benefit of his experience in the care, treatment, and  
11 rehabilitation of narcotic addicts to the end that each State  
12 may be encouraged to provide adequate facilities and methods  
13 for the care and treatment of its narcotic addicts.

14 PART B—FEDERAL-STATE COOPERATION

15 IN GENERAL

16 SEC. 311. The Surgeon General is authorized to accept  
17 from State and local authorities any assistance in the enforce-  
18 ment of quarantine regulations made pursuant to this Act  
19 which such authorities may be able and willing to provide.  
20 The Surgeon General shall also assist States and their political  
21 subdivisions in the prevention and suppression of communi-  
22 cable diseases, shall cooperate with and aid State and local  
23 authorities in the enforcement of their quarantine and other  
24 health regulations and in carrying out the purposes specified  
25 in section 314, and shall advise the several States on matters

1 relating to the preservation and improvement of the public  
2 health.

3 HEALTH CONFERENCES

4 SEC. 312. A conference of the health authorities of the  
5 several States shall be called annually by the Surgeon Gen-  
6 eral. Whenever in his opinion the interests of the public  
7 health would be promoted by a conference, the Surgeon  
8 General may invite as many of such health authorities to con-  
9 fer as he deems necessary or proper. Upon the application  
10 of health authorities of five or more States it shall be the duty  
11 of the Surgeon General to call a conference of all State and  
12 Territorial health authorities joining in the request. Each  
13 State represented at any conference shall be entitled to a  
14 single vote.

15 COLLECTION OF VITAL STATISTICS

16 SEC. 313. To secure uniformity in the registration of  
17 mortality, morbidity, and vital statistics the Surgeon General  
18 shall prepare and distribute suitable and necessary forms for  
19 the collection and compilation of such statistics which shall  
20 be published as a part of the health reports published by the  
21 Surgeon General.

22 GRANTS AND SERVICES TO STATES

23 SEC. 314. (a) To enable the Surgeon General to carry  
24 out the purposes of section 301 with respect to developing  
25 more effective measures for the prevention, treatment, and

1 control of venereal diseases, and to assist, through grants and  
2 as otherwise provided in this section, States, counties, health  
3 districts, and other political subdivisions of the States in  
4 establishing and maintaining adequate measures for the pre-  
5 vention, treatment, and control of such diseases, including the  
6 training of personnel for State and local health work, and to  
7 enable him to prevent and control the spread of the venereal  
8 diseases in interstate traffic, and to meet the cost of pay,  
9 allowances, and traveling expenses of commissioned officers  
10 and other personnel of the Service detailed to assist in  
11 carrying out the purposes of this section with respect to the  
12 venereal diseases, and to administer this section with respect  
13 to such diseases, there is hereby authorized to be appro-  
14 priated for each fiscal year a sum sufficient to carry out  
15 the purposes of this subsection.

16 (b) To enable the Surgeon General to assist, through  
17 grants and as otherwise provided in this section, States,  
18 counties, health districts, and other political subdivisions of  
19 the States in establishing and maintaining adequate public  
20 health services, including grants for demonstrations and for  
21 the training of personnel for State and local health work,  
22 there is hereby authorized to be appropriated for each fiscal  
23 year a sum not to exceed \$20,000,000. Of the sum appro-  
24 priated for each fiscal year pursuant to this subsection there  
25 shall be available an amount, not to exceed \$2,000,000, to



1 enable the Surgeon General to provide demonstrations and  
2 to train personnel for State and local health work and to  
3 meet the cost of pay, allowances, and traveling expenses  
4 of commissioned officers and other personnel of the Service  
5 detailed to assist States in carrying out the purposes of this  
6 subsection.

7 (c) For each fiscal year, the Surgeon General, with the  
8 approval of the Administrator, shall determine the total sum  
9 from the appropriation under subsection (a) and the total  
10 sum from the appropriation under subsection (b) which  
11 shall be available for allotment among the several States.  
12 He shall, in accordance with regulations, from time to time  
13 make allotments from such sums to the several States on  
14 the basis of (1) the population, (2) the size of the venereal-  
15 disease problem and the size of other special health problems,  
16 respectively, and (3) the financial need of the respective  
17 States. Upon making such allotments the Surgeon General  
18 shall notify the Secretary of the Treasury of the amounts  
19 thereof.

20 (d) The Surgeon General, with the approval of the  
21 Administrator, shall from time to time determine the amounts  
22 to be paid to each State from the allotments to such State,  
23 and shall certify to the Secretary of the Treasury, the amounts  
24 so determined, reduced or increased, as the case may be, by  
25 the amounts by which he finds that estimates of required

1 expenditures with respect to any prior period were greater  
2 or less than the actual expenditures for such period. Upon  
3 receipt of such certification, the Secretary of the Treasury  
4 shall, through the Division of Disbursement of the Treasury  
5 Department and prior to audit or settlement by the General  
6 Accounting Office, pay in accordance with such certification.

7 (e) The moneys so paid to any State shall be ex-  
8 pended solely in carrying out the purposes specified in sub-  
9 section (a) or subsection (b) of this section, as the case  
10 may be, and in accordance with plans presented by the  
11 health authority of such State and approved by the Surgeon  
12 General.

13 (f) Money so paid shall be paid upon the condition that  
14 there shall be spent in such State for the same general pur-  
15 pose from funds of such State and its political subdivisions  
16 an amount determined in accordance with regulations.

17 (g) Whenever the Surgeon General, after reasonable  
18 notice and opportunity for hearing to the health authority of  
19 the State, finds that, with respect to money paid to the State  
20 out of appropriations under subsection (a) or subsection  
21 (b), as the case may be, there is a failure to comply sub-  
22 stantially with either—

23 (1) the provisions of this section;

24 (2) the plan submitted under subsection (e) ; or

25 (3) the regulations;

1 the Surgeon General shall notify such State health authority  
2 either that further payments will not be made to the State  
3 from appropriations under such subsection (or in his discre-  
4 tion that further payments will not be made to the State  
5 from such appropriations for activities in which there is such  
6 failure), until he is satisfied that there will no longer be any  
7 such failure. Until he is so satisfied the Surgeon General  
8 shall make no further certification for payment to such State  
9 from appropriations under such subsection, or shall limit  
10 payment to activities in which there is no such failure.

11 (h) All regulations and amendments thereto with re-  
12 spect to grants to States under this section shall be made  
13 after consultation with a conference of the State health  
14 authorities. Insofar as practicable, the Surgeon General shall  
15 obtain the agreement of the State health authorities prior to  
16 the issuance of any such regulations or amendments.

17 (i) Funds appropriated under subsection (a) of this  
18 section, in addition to being available for payments to States,  
19 shall also be available for expenditure by the Surgeon Gen-  
20 eral in otherwise carrying out such subsection, including  
21 expenditures for printing and binding of the findings of  
22 investigations, and for pay and allowances and traveling  
23 expenses of personnel of the Service engaged in activities  
24 authorized by such subsection.

## 1 HEALTH EDUCATION AND INFORMATION

2 SEC. 315. From time to time the Surgeon General shall  
3 issue information related to public health, in the form of publi-  
4 cations or otherwise, for the use of the public, and shall  
5 publish weekly reports of health conditions in the United  
6 States and other countries and other pertinent health informa-  
7 tion for the use of persons and institutions engaged in work  
8 related to the functions of the Service.

## 9 PART C—HOSPITALS, MEDICAL EXAMINATIONS, AND

## 10 MEDICAL CARE

## 11 HOSPITALS

12 SEC. 321. The Surgeon General, pursuant to regulations,  
13 shall—

14 (a) Control, manage, and operate all institutions,  
15 hospitals, and stations of the Service, and provide for  
16 the care, treatment and hospitalization of patients, includ-  
17 ing the furnishing of prosthetic and orthopedic devices;

18 (b) Provide for the transfer of Public Health Serv-  
19 ice patients, in the care of attendants where necessary,  
20 between hospitals and stations operated by the Service  
21 or between such hospitals and stations and other hos-  
22 pitals and stations in which Public Health Service  
23 patients may be received, and the payment of expenses  
24 of such transfer;



(c) Provide for the disposal of articles produced by patients in the course of their curative treatment, either by allowing the patient to retain such articles or by selling them and depositing the money received therefor to the credit of the appropriation from which the materials for making the articles were purchased; and

(d) Provide for the disposal of money and effects,  
in the custody of the hospitals or stations, of deceased  
patients.

11 CARE AND TREATMENT OF SEAMEN AND CERTAIN OTHER  
12 PERSONS

13 SEC. 322. (a) The following persons shall be entitled,  
14 in accordance with regulations, to medical, surgical, and  
15 dental treatment and hospitalization without charge at hos-  
16 pitals and other stations of the Service:

(1) Seamen employed on vessels of the United States registered, enrolled, and licensed under the maritime laws thereof, other than canal boats engaged in the coasting trade;

(2) Seamen employed on United States or foreign  
flag vessels as employees of the United States through  
the War Shipping Administration;

(3) Seamen, not enlisted or commissioned in the military or naval establishments, who are employed on

1 State school ships or on vessels of the United States  
2 Government of more than five tons' burden ;

3 (4) Cadets at State maritime academies or on State  
4 training ships ;

5 (5) Seamen on vessels of the Mississippi River  
6 Commission and, upon application of their commanding  
7 officers, officers and crews of vessels of the Fish and  
8 Wildlife Service ;

9 (6) Enrollees in the United States Maritime Service  
10 on active duty and members of the Merchant Marine  
11 Cadet Corps ; and

12 (7) Employees and noncommissioned officers in the  
13 field service of the Public Health Service when injured  
14 or taken sick in line of duty.

15 (b) When suitable accommodations are available, sea-  
16 men on foreign-flag vessels may be given medical, surgical,  
17 and dental treatment and hospitalization on application of  
18 the master, owner, or agent of the vessel at hospitals and  
19 other stations of the Service at rates fixed by regulations.  
20 All expenses connected with such treatment, including burial  
21 in the event of death, shall be paid by such master, owner,  
22 or agent. No such vessel shall be granted clearance until  
23 such expenses are paid or their payment appropriately guar-  
24 anteed to the Collector of Customs.

25 (c) Any person when detained in accordance with quar-

1 antine laws, or, at the request of the Immigration and Natu-  
2 ralization Service, any person detained by that Service, may  
3 be treated and cared for by the Public Health Service.

4 (d) Persons not entitled to treatment and care at insti-  
5 tutions, hospitals, and stations of the Service may, in accord-  
6 ance with regulations of the Surgeon General, be admitted  
7 thereto for temporary treatment and care in case of  
8 emergency.

9 (e) Persons entitled to care and treatment under subsec-  
10 tion (a) of this section may, in accordance with regulations,  
11 receive such care and treatment at the expense of the Service  
12 from public or private medical or hospital facilities other than  
13 those of the Service, when authorized by the officer in charge  
14 of the station at which the application is made.

15 CARE AND TREATMENT OF FEDERAL PRISONERS

16 SEC. 323. The Service shall supervise and furnish med-  
17 ical treatment and other necessary medical, psychiatric, and  
18 related technical and scientific services, authorized by the  
19 Act of May 13, 1930, as amended (U. S. C., 1940 edition,  
20 title 18, secs. 751, 752), in penal and correctional in-  
21 stitutions of the United States.

22 EXAMINATION AND TREATMENT OF FEDERAL EMPLOYEES

23 SEC. 324. The Surgeon General is authorized to provide  
24 at institutions, hospitals, and stations of the Service medical,  
25 surgical, and hospital services and supplies for persons en-

1 titled to treatment under the United States Employees' Com-  
2 pension Act and extensions thereof. The Surgeon General  
3 may also provide for making medical examinations of—

4 (a) employees of the Alaska Railroad and employ-  
5 ees of the Federal Government for retirement purposes;

6 (b) employees in the Federal classified service, and  
7 applicants for appointment, as requested by the Civil  
8 Service Commission for the purpose of promoting health  
9 and efficiency;

10 (c) seamen for purposes of qualifying for cer-  
11 tificates of service; and

12 (d) employees eligible for benefits under the  
13 Longshoremen's and Harbor Workers' Compensation  
14 Act, as amended (U. S. C., 1940 edition, title 33,  
15 chapter 18), as requested by any deputy commis-  
16 sioner thereunder.

17 EXAMINATION OF ALIENS

18 SEC. 325. The Surgeon General shall provide for making,  
19 at places within the United States or in other countries,  
20 such physical and mental examinations of aliens as are  
21 required by the immigration laws, subject to administra-  
22 tive regulations prescribed by the Attorney General and  
23 medical regulations prescribed by the Surgeon General with  
24 the approval of the Administrator.



1 SERVICES TO COAST GUARD, COAST AND GEODETIC SURVEY,  
2 AND PUBLIC HEALTH SERVICE

3 SEC. 326. (a) Subject to regulations of the President—

4 (1) commissioned officers, chief warrant officers,  
5 warrant officers, cadets, and enlisted personnel of the  
6 Regular Coast Guard, including those on shore duty  
7 and those on detached duty, whether on active duty  
8 or retired; and Regular and temporary members of  
9 the United States Coast Guard Reserve when on active  
10 duty or when retired for disability;

11 (2) commissioned officers, ships' officers, and  
12 members of the crews of vessels of the United States  
13 Coast and Geodetic Survey, including those on shore  
14 duty and those on detached duty, whether on active  
15 duty or retired; and

16 (3) commissioned officers of the Regular Corps  
17 of the Public Health Service, whether on active duty  
18 or retired, and commissioned officers of the Reserve  
19 Corps when on active duty or when retired for dis-  
20 ability;

21 shall be entitled to medical, surgical, and dental treatment  
22 and hospitalization by the Service. The Surgeon General  
23 may detail commissioned officers for duty aboard vessels of  
24 the Coast Guard or the Coast and Geodetic Survey.

25 (b) Subject to regulations of the President, the depend-

ent members of families (as defined in such regulations) of persons specified in subsection (a), other than temporary members of the United States Coast Guard Reserve, shall be furnished medical advice and out-patient treatment by the Service at its hospitals and relief stations, and they shall also be furnished hospitalization at hospitals of the Service, if suitable accommodations are available, at a per diem cost to the officer, enlisted person, or member of a crew concerned. Such cost shall be at such uniform rate as may be prescribed in such regulations of the President.

(c) The Service shall provide all services referred to in subsection (a) required by the Coast Guard and shall perform all duties prescribed by statute in connection with the examinations to determine physical or mental condition for purposes of appointment, enlistment, and reenlistment, promotion and retirement, and officers of the Service assigned to duty on Coast Guard vessels may extend aid to the crews of American vessels engaged in deep-sea fishing.

#### INTERDEPARTMENTAL WORK

SEC. 327. Nothing contained in this part shall affect the authority of the Service to furnish any materials, supplies, or equipment, or perform any work or services, requested in accordance with section 7 of the Act of May 21, 1920, as amended (U. S. C., 1940 edition, title 31, sec. 686), or the authority of any other executive department

1 to furnish any materials, supplies, or equipment, or perform  
2 any work or services, requested by the Federal Security  
3 Agency for the Service in accordance with that section.

4 PART D—LEPERS

5 RECEIPT OF LEPERS

6 SEC. 331. The Service shall, in accordance with regu-  
7 lations, receive into any hospital of the Service suitable for  
8 his accommodation any person afflicted with leprosy who  
9 presents himself for care, detention, or treatment, or who may  
10 be apprehended under section 332 or 361 of this Act, and  
11 any person afflicted with leprosy duly consigned to the care  
12 of the Service by the proper health authority of any State,  
13 Territory, or the District of Columbia. The Surgeon General  
14 is authorized, upon the request of any health authority, to  
15 send for any person within the jurisdiction of such authority  
16 who is afflicted with leprosy and to convey such person to the  
17 appropriate hospital for detention and treatment. When the  
18 transportation of any such person is undertaken for the pro-  
19 tection of the public health the expense of such removal shall  
20 be met from funds available for the maintenance of hospitals  
21 of the Service.

22 APPREHENSION, DETENTION, TREATMENT, AND RELEASE

23 SEC. 332. The Surgeon General may provide by regu-  
24 lation for the apprehension, detention, treatment, and release  
25 of persons being treated by the Service for leprosy.

## PART E—NARCOTICS ADDICTS

## CARE AND TREATMENT

SEC. 341. The Surgeon General is authorized to provide for the confinement, care, protection, treatment, and discipline of persons addicted to the use of habit-forming narcotic drugs who voluntarily submit themselves for treatment and addicts who have been or are hereafter convicted of offenses against the United States, including persons convicted by general courts martial and consular courts. Such care and treatment shall be provided at hospitals of the Service especially equipped for the accommodation of such patients and shall be designed to rehabilitate such persons, to restore them to health, and, where necessary, to train them to be self-supporting and self-reliant.

## EMPLOYMENT OF ADDICTS

SEC. 342. Narcotic addicts in hospitals of the Service designated for their care shall be employed in such manner and under such conditions as the Surgeon General may direct. In such hospitals the Surgeon General may, in his discretion, establish industries, plants, factories, or shops for the production and manufacture of articles, commodities, and supplies for the United States Government. The Secretary of the Treasury may require any Government department, establishment, or other institution, for whom appropriations are



1 made directly or indirectly by the Congress of the United  
2 States, to purchase at current market prices, as determined  
3 by him or his authorized representative, such of the articles,  
4 commodities, or supplies so produced or manufactured as  
5 meet their specifications; and the Surgeon General shall pro-  
6 vide for payment to the inmates or their dependents of such  
7 pecuniary earnings as he may deem proper. The Adminis-  
8 trator shall establish a working-capital fund for such in-  
9 dustries, plants, factories, and shops out of any funds appro-  
10 priated for Public Health Service hospitals at which addicts  
11 are treated and cared for; and such fund shall be available  
12 for the purchase, repair, or replacement of machinery or  
13 equipment, for the purchase of raw materials and supplies,  
14 for the purchase of uniforms and other distinctive wearing  
15 apparel of employees in the performance of their official  
16 duties, and for the employment of necessary civilian officers  
17 and employees. The Surgeon General may provide for the  
18 disposal of products of the industrial activities conducted  
19 pursuant to this section, and the proceeds of any sales thereof  
20 shall be covered into the Treasury of the United States to  
21 the credit of the working-capital fund.

22

## CONVICTS

23 SEC. 343. (a) The authority vested with the power to  
24 designate the place of confinement of a prisoner shall transfer  
25 to hospitals of the Service especially equipped for the ac-

1 commodation of addicts, if accommodations are available,  
2 all addicts who have been or are hereafter sentenced to con-  
3 finement, or who are now or shall hereafter be confined, in  
4 any penal, correctional, disciplinary, or reformatory institu-  
5 tion of the United States, including those addicts convicted  
6 of offenses against the United States who are confined in  
7 State and Territorial prisons, penitentiaries, and reformatories,  
8 except that no addict shall be transferred to a hospital of the  
9 Service who, in the opinion of the officer authorized to direct  
10 the transfer, is not a proper subject for confinement in such  
11 an institution either because of the nature of the crime he has  
12 committed or because of his apparent incorrigibility. The  
13 authority vested with the power to designate the place of  
14 confinement of a prisoner shall transfer from a hospital of the  
15 Service to the institution from which he was received, or to  
16 such other institution as may be designated by the proper  
17 authority, any addict whose presence at a hospital of the  
18 Service is detrimental to the well-being of the hospital or who  
19 does not continue to be a narcotic addict. All transfers of  
20 such prisoners to or from a hospital of the Service shall be  
21 accompanied by necessary attendants as directed by the  
22 officer in charge of such hospital and the actual and necessary  
23 expenses incident to such transfers shall be paid from the  
24 appropriation for the maintenance of such Service hospital  
25 except to the extent that other Federal agencies are author-

1 ized or required by law to pay expenses incident to such  
2 transfers. Whenever an alien addict transferred to a Serv-  
3 ice hospital pursuant to this subsection is entitled to his dis-  
4 charge but is subject to deportation, in lieu of being returned  
5 to the penal institution from which he came he shall be de-  
6 ported by the authority vested by law with power over  
7 deportation.

8 (b) The provisions of the Act of June 21, 1902, as  
9 amended (U. S. C., 1940 edition, title 18, secs. 710-712a),  
10 regulating commutation of sentence for good conduct of  
11 United States prisoners, section 8 of the Act of May 27, 1930  
12 (U. S. C., 1940 edition, title 18, sec. 744h), regulating  
13 commutation of sentence for employment in industry, and  
14 the Act of June 25, 1910, as amended (U. S. C., 1940  
15 edition, title 18, secs. 714-723c), relating to parole, shall be  
16 applicable to any narcotic addict confined in any institution  
17 in execution of a judgment or sentence upon conviction of  
18 an offense against the United States; except that no narcotic  
19 addict confined in any institution, whether or not an institu-  
20 tion of the Public Health Service, shall be released by reason  
21 of commutation of sentence or parole until the Surgeon  
22 General shall have certified that such individual is no longer  
23 an addict.

24 (c) Not later than one month prior to the expiration  
25 of the sentence of any addict confined in a Service hospital,

1 he shall be examined by the Surgeon General or his author-  
2 ized representative. If the Surgeon General believes the  
3 person to be discharged is still an addict and that he may by  
4 further treatment in a Service hospital be cured of his ad-  
5 diction, the addict shall be informed, in accordance with  
6 regulations, of the advisability of his submitting himself to  
7 further treatment. The addict may then apply in writing  
8 to the Surgeon General for further treatment in a Service  
9 hospital for a period not exceeding the maximum length of  
10 time considered necessary by the Surgeon General. Upon  
11 approval of the application by the Surgeon General or his  
12 authorized agent, the addict may be given such further  
13 treatment as is necessary to cure him of his addiction.

14 (d) Every person convicted of an offense against the  
15 United States, upon discharge, or upon release on parole,  
16 from a hospital of the Service, shall be furnished with the gra-  
17 tuities and transportation authorized by law to be furnished  
18 to prisoners upon release from a penal, correctional, disci-  
19 plinary, or reformatory institution.

20 (e) Any court of the United States having the power  
21 to suspend the imposition or execution of sentence and to  
22 place a defendant on probation under any existing laws may  
23 impose as one of the conditions of such probation that the  
24 defendant, if an addict, shall submit himself for treatment  
25 at a hospital of the Service especially equipped for the



1 accommodation of addicts until discharged therefrom as  
2 cured and that he shall be admitted thereto for such purpose.  
3 Upon the discharge of any such probationer from a hospital  
4 of the Service, he shall be furnished with the gratuities and  
5 transportation authorized by law to be furnished to prisoners  
6 upon release from a penal, correctional, disciplinary, or  
7 reformatory institution. The actual and necessary expense  
8 incident to transporting such probationer to such hospital  
9 and to furnishing such transportation and gratuities shall  
10 be paid from the appropriation for the maintenance of such  
11 hospital except to the extent that other Federal agencies  
12 are authorized or required by law to pay the cost of such  
13 transportation: *Provided*, That where existing law vests a  
14 discretion in any officer as to the place to which transporta-  
15 tion shall be furnished or as to the amount of clothing and  
16 gratuities to be furnished, such discretion shall be exercised  
17 by the Surgeon General with respect to addicts discharged  
18 from hospitals of the Service.

19 VOLUNTARY PATIENTS

20 SEC. 344. (a) Any addict, whether or not he shall have  
21 been convicted of an offense against the United States, may  
22 apply to the Surgeon General for admission to a hospital  
23 of the Service especially equipped for the accommodation  
24 of addicts.

25 (b) Any applicant shall be examined by the Surgeon

1 General who shall determine whether the applicant is an  
2 addict, whether by treatment in a hospital of the Service he  
3 may probably be cured of his addiction, and the estimated  
4 length of time necessary to effect his cure. The Surgeon  
5 General may, in his discretion, admit the applicant to a Serv-  
6 ice hospital. No such addict shall be admitted unless he  
7 agrees to submit to treatment for the maximum amount of  
8 time estimated by the Surgeon General to be necessary to  
9 effect a cure, and unless suitable accommodations are avail-  
10 able after all eligible addicts convicted of offenses against  
11 the United States have been admitted. Any such addict  
12 may be required to pay for his subsistence, care, and treat-  
13 ment at rates fixed by the Surgeon General and amounts so  
14 paid shall be covered into the Treasury of the United States  
15 to the credit of the appropriation from which the expenditure  
16 for his subsistence, care, and treatment was made.

17 (d) Any addict admitted for treatment under this sec-  
18 tion, including any addict, not convicted of an offense, who  
19 voluntarily submits himself for treatment, may be confined  
20 in a hospital of the Service for a period not exceeding the  
21 maximum amount of time estimated by the Surgeon General  
22 as necessary to effect a cure of the addiction or until such  
23 time as he ceases to be an addict.

24 (c) Any addict admitted for treatment under this sec-  
25 tion shall not thereby forfeit or abridge any of his rights as a

1 citizen of the United States; nor shall such admission or  
2 treatment be used against him in any proceeding in any  
3 court; and the record of his voluntary commitment shall be  
4 confidential and shall not be divulged.

5 PENALTIES

6 SEC. 345. (a) Any person not authorized by law or by  
7 the Surgeon General who introduces or attempts to intro-  
8 duce into or upon the grounds of any hospital of the Service  
9 at which addicts are treated and cared for, any habit-  
10 forming narcotic drug, weapon, or any other contraband  
11 article or thing, or any contraband letter or message intended  
12 to be received by an inmate thereof, shall be guilty of a felony  
13 and, upon conviction thereof, shall be punished by imprison-  
14 ment for not more than ten years.

15 (b) It shall be unlawful for any person properly com-  
16 mitted thereto to escape or attempt to escape from a hos-  
17 pital of the Service at which addicts are treated and cared  
18 for, and any such person upon apprehension and conviction  
19 in a United States court shall be punished by imprisonment  
20 for not more than five years, such sentence to begin upon  
21 the expiration of the sentence for which such person was  
22 originally confined.

23 (c) Any person who procures the escape of any person  
24 admitted to a hospital of the Service at which addicts are  
25 treated and cared for, or who advises, connives at, aids, or

1 assists in such escape, or who conceals any such inmate  
2 after such escape, shall be punished upon conviction in a  
3 United States court by imprisonment in the penitentiary  
4 for not more than three years.

5                   PART F—BIOLOGICAL PRODUCTS

6                   REGULATION OF BIOLOGICAL PRODUCTS

7       SEC. 351. (a) No person shall sell, barter, or exchange,  
8 or offer for sale, barter, or exchange in the District of Colum-  
9 bia, or send, carry, or bring for sale, barter, or exchange  
10 from any State or possession into any other State or pos-  
11 session or into any foreign country, or from any foreign  
12 country into any State or possession, any virus, therapeutic  
13 serum, toxin, antitoxin, or analogous product, or arsphen-  
14 mine or its derivatives (or any other trivalent organic arsenic  
15 compound), applicable to the prevention, treatment, or cure  
16 of diseases or injuries of man, unless (1) such virus, serum,  
17 toxin, antitoxin, or other product has been propagated or  
18 manufactured and prepared at an establishment holding an  
19 unsuspended and unrevoked license, issued by the Adminis-  
20 trator as hereinafter authorized, to propagate or manufacture,  
21 and prepare such virus, serum, toxin, antitoxin, or other  
22 product for sale in the District of Columbia, or for sending,  
23 bringing, or carrying from place to place aforesaid; and (2)  
24 each package of such virus, serum, toxin, antitoxin, or other  
25 product is plainly marked with the proper name of the article



1 contained therein, the name, address, and license number of  
2 the manufacturer, and the date beyond which the contents  
3 cannot be expected beyond reasonable doubt to yield their  
4 specific results. The suspension or revocation of any license  
5 shall not prevent the sale, barter, or exchange of any virus,  
6 serum, toxin, antitoxin, or other product aforesaid which has  
7 been sold and delivered by the licensee prior to such sus-  
8 pension or revocation, unless the owner or custodian of such  
9 virus, serum, toxin, antitoxin, or other product aforesaid has  
10 been notified by the Administrator not to sell, barter, or  
11 exchange the same.

12 (b) No person shall falsely label or mark any package  
13 or container of any virus, serum, toxin, antitoxin, or other  
14 product aforesaid; nor alter any label or mark on any pack-  
15 age or container of any virus, serum, toxin, antitoxin, or other  
16 product aforesaid so as to falsify such label or mark.

17 (c) Any officer, agent, or employee of the Federal Secu-  
18 rity Agency, authorized by the Administrator for the purpose,  
19 may during all reasonable hours enter and inspect any estab-  
20 lishment for the propagation or manufacture and preparation  
21 of any virus, serum, toxin, antitoxin, or other product afore-  
22 said for sale, barter, or exchange in the District of Columbia,  
23 or to be sent, carried, or brought from any State or possession  
24 into any other State or possession or into any foreign country,  
25 or from any foreign country into any State or possession.

1       (d) Licenses for the maintenance of establishments for  
2 the propagation or manufacture and preparation of products  
3 described in subsection (a) of this section may be issued only  
4 upon a showing that the establishment and the products for  
5 which a license is desired meet standards, designed to insure  
6 the continued safety, purity, potency and efficaciousness of  
7 such products, prescribed in regulations made jointly by the  
8 Surgeon General, the Surgeon General of the Army, and the  
9 Surgeon General of the Navy, and approved by the Adminis-  
10 trator, and licenses for new products may be issued only upon  
11 a showing that they meet such standards. All such licenses  
12 shall be issued, suspended, and revoked as prescribed by regu-  
13 lations and all licenses issued for the maintenance of estab-  
14 lishments for the propagation or manufacture and prepara-  
15 tion, in any foreign country, of any such products for sale,  
16 barter, or exchange in any State or possession shall be issued  
17 upon condition that the licensees will permit the inspection  
18 of their establishments in accordance with subsection (c)  
19 of this section.

20       (e) No person shall interfere with any officer, agent,  
21 or employee of the Service in the performance of any duty  
22 imposed upon him by this section or by regulations made  
23 by authority thereof.

24       (f) Any person who shall violate, or aid or abet in  
25 violating, any of the provisions of this section shall be pun-

1 ished upon conviction by a fine not exceeding \$500 or by  
2 imprisonment not exceeding one year, or by both such fine  
3 and imprisonment, in the discretion of the court.

4 (g) The persons and the products to which this section  
5 is applicable shall be subject also to the provisions of the  
6 Federal Food, Drug, and Cosmetic Act, except that sec-  
7 tion 505 of such Act shall not apply in the case of any virus,  
8 serum, toxin, antitoxin, or other product propagated, manu-  
9 factured, or prepared pursuant to an unsuspended and un-  
10 revoked license issued under this section.

11 PREPARATION OF BIOLOGICAL PRODUCTS

12 SEC. 352. (a) The Service may prepare for its own use  
13 any product described in section 351 and any product neces-  
14 sary to carrying out any of the purposes of section 301.

15 (b) The Service may prepare any product described in  
16 section 351 for the use of other Federal departments or  
17 agencies, and public or private agencies and individuals  
18 engaged in work in the field of medicine when such product  
19 is not available from establishments licensed under such  
20 section.

21 PART G—QUARANTINE AND INSPECTION

22 CONTROL OF COMMUNICABLE DISEASES

23 SEC. 361. (a) The Surgeon General, with the approval  
24 of the Administrator, is authorized to make and enforce such  
25 regulations as in his judgment are necessary to prevent the

1 introduction, transmission, or spread of communicable diseases  
2 from foreign countries into the States or possessions, or from  
3 one State or possession into any other State or possession.  
4 For purposes of carrying out and enforcing such regulations,  
5 the Surgeon General may provide for such inspection, fumi-  
6 gation, disinfection, sanitation, pest extermination, destruction  
7 of animals or articles found to be so infected or contaminated  
8 as to be sources of dangerous infection to human beings, and  
9 other measures, as in his judgment may be necessary.

10 (b) Regulations prescribed under this section shall not  
11 provide for the apprehension, detention, or conditional re-  
12 lease of individuals except for the purpose of preventing the  
13 introduction, transmission, or spread of such communicable  
14 diseases as may be specified from time to time in Executive  
15 orders of the President upon the recommendation of the Na-  
16 tional Advisory Health Council and the Surgeon General.

17 (c) Except as provided in subsection (d), regulations  
18 prescribed under this section, insofar as they provide for  
19 the apprehension, detention, examination, or conditional re-  
20 lease of individuals, shall be applicable only to individuals  
21 coming into a State or possession from a foreign country, the  
22 Territory of Hawaii, or a possession.

23 (d) On recommendation of the National Advisory  
24 Health Council, regulations prescribed under this section may  
25 provide for the apprehension and examination of any indi-



1 vidual reasonably believed to be infected with a communi-  
2 cable disease in a communicable stage and (1) to be mov-  
3 ing or about to move from a State to another State; or (2)  
4 to be a probable source of infection to individuals who, while  
5 infected with such disease in a communicable stage, will be  
6 moving from a State to another State. Such regulations may  
7 provide that if upon examination any such individual is  
8 found to be infected, he may be detained for such time and  
9 in such manner as may be reasonably necessary.

#### 10 SUSPENSION OF ENTRIES AND IMPORTS FROM DESIGNATED

#### 11 PLACES

12 SEC. 362. Whenever the Surgeon General determines  
13 that by reason of the existence of any communicable disease  
14 in a foreign country there is serious danger of the introduction  
15 of such disease into the United States, and that this danger  
16 is so increased by the introduction of persons or property from  
17 such country that a suspension of the right to introduce such  
18 persons and property is required in the interest of the public  
19 health, the Surgeon General, in accordance with regulations  
20 approved by the President, shall have the power to prohibit,  
21 in whole or in part, the introduction of persons and property  
22 from such countries or places as he shall designate in order to  
23 avert such danger, and for such period of time as he may  
24 deem necessary for such purpose.

## SPECIAL POWERS IN TIME OF WAR

SEC. 363. To protect the military and naval forces and war workers of the United States, in time of war, against any communicable disease specified in Executive orders as provided in subsection (b) of section 361, the Surgeon General, on recommendation of the National Advisory Health Council, is authorized to provide by regulations for the apprehension and examination, in time of war, of any individual reasonably believed (1) to be infected with such disease in a communicable stage and (2) to be a probable source of infection to members of the armed forces of the United States or to individuals engaged in the production or transportation of arms, munitions, ships, food, clothing, or other supplies for the armed forces. Such regulations may provide that if upon examination any such individual is found to be so infected, he may be detained for such time and in such manner as may be reasonably necessary.

## QUARANTINE STATIONS

SEC. 364. (a) Except as provided in title II of the Act of June 15, 1917, as amended (U. S. C., 1940 edition, title 50, secs. 191-194), the Surgeon General shall control, direct, and manage all United States quarantine stations, grounds, and anchorages, designate their boundaries, and designate the quarantine officers to be in charge thereof. With the approval of the President

1 he shall from time to time select suitable sites for and estab-  
2 lish such additional stations, grounds, and anchorages in  
3 the States and possessions of the United States as in his  
4 judgment are necessary to prevent the introduction of com-  
5 municable diseases into the States and possessions of the  
6 United States.

7 (b) The Surgeon General shall establish the hours dur-  
8 ing which quarantine service shall be performed at each  
9 quarantine station, and, upon application by any interested  
10 party, may establish quarantine inspection during the twenty-  
11 four hours of the day, or any fraction thereof, at such quar-  
12 antine stations as, in his opinion, require such extended serv-  
13 ice. He may restrict the performance of quarantine inspec-  
14 tion to hours of daylight for such arriving vessels as cannot,  
15 in his opinion, be satisfactorily inspected during hours of  
16 darkness. No vessel shall be required to undergo quarantine  
17 inspection during the hours of darkness, unless the quarantine  
18 officer at such quarantine station shall deem an immediate  
19 inspection necessary to protect the public health. Uniformity  
20 shall not be required in the hours during which quarantine  
21 inspection may be obtained at the various ports of the United  
22 States.

23 = CERTAIN DUTIES OF CONSULAR AND OTHER OFFICERS

24 SEC. 365. (a) Any consular or medical officer of the  
25 United States, designated for such purpose by the Adminis-

1 trator, shall make reports to the Surgeon General, on such  
2 forms and at such intervals as the Surgeon General may  
3 prescribe, of the health conditions at the port or place at  
4 which such officer is stationed.

5 (b) It shall be the duty of the customs officers and of  
6 Coast Guard officers to aid in the enforcement of quarantine  
7 rules and regulations; but no additional compensation, except  
8 actual and necessary traveling expenses, shall be allowed any  
9 such officer by reason of such services.

#### 10 BILLS OF HEALTH

11 SEC. 366. (a) Any vessel at any foreign port or place  
12 clearing or departing for any port or place in a State or  
13 possession shall be required to obtain from the consular officer  
14 of the United States or from the Public Health Service officer,  
15 or other medical officer of the United States designated by  
16 the Surgeon General, at the port or place of departure, a bill  
17 of health in duplicate, in the form prescribed by the Surgeon  
18 General. The President, from time to time, shall specify  
19 the ports at which a medical officer shall be stationed for  
20 this purpose. Such bill of health shall set forth the sanitary  
21 history and condition of said vessel, and shall state that it  
22 has in all respects complied with the regulations prescribed  
23 pursuant to subsection (c). Before granting such duplicate  
24 bill of health, such consular or medical officer shall be satis-  
25 fied that the matters and things therein stated are true.



1 The consular officer shall be entitled to demand and receive  
2 the fees for bills of health and such fees shall be established  
3 by regulation.

4 (b) Original bills of health shall be delivered to the  
5 collectors of customs at the port of entry. Duplicate copies  
6 of such bills of health shall be delivered at the time of  
7 inspection to quarantine officers at such port. The bills of  
8 health herein prescribed shall be considered as part of the  
9 ship's papers, and when duly certified to by the proper con-  
10 sular or other officer of the United States, over his official  
11 signature and seal, shall be accepted as evidence of the  
12 statements therein contained in any court of the United  
13 States.

14 (c) The Surgeon General shall from time to time pre-  
15 scribe regulations, applicable to vessels referred to in sub-  
16 section (a) of this section for the purpose of preventing the  
17 introduction into the States or possessions of the United  
18 States of any communicable disease by securing the best  
19 sanitary condition of such vessels, their cargoes, passengers,  
20 and crews. Such regulations shall be observed by such  
21 vessels prior to departure, during the course of the voyage,  
22 and also during inspection, disinfection, or other quarantine  
23 procedure upon arrival at any United States quarantine  
24 station.

25 (d) The provisions of subsections (a) and (b) of this

1 section shall not apply to vessels plying between such foreign  
2 ports on or near the frontiers of the United States and ports  
3 of the United States as are designated by treaty or may be  
4 designated by regulation; nor, to the extent prescribed by  
5 regulations, to such of the other vessels referred to in sub-  
6 section (a) hereof as may be designated in such regulations.

7 (e) It shall be unlawful for any vessel to enter any port  
8 in any State or possession of the United States to discharge  
9 its cargo, or land its passengers, except upon a certificate  
10 of the quarantine officer that regulations prescribed under  
11 subsection (c) have in all respects been complied with by  
12 such officer, the vessel, and its master. The master of every  
13 such vessel shall deliver such certificate to the collector of  
14 customs at the port of entry, together with the original bill  
15 of health and other papers of the vessel.

#### 16 CIVIL AIR NAVIGATION AND CIVIL AIRCRAFT

17 SEC. 367. The Surgeon General is authorized to pro-  
18 vide by regulations for the application to civil air navigation  
19 and civil aircraft of any of the provisions of sections 364,  
20 365, and 366 and regulations prescribed thereunder (includ-  
21 ing penalties and forfeitures for violations of such sections and  
22 regulations), to such extent and upon such conditions as  
23 he deems necessary for the safeguarding of the public health.

#### 24 PENALTIES

25 SEC. 368. (a) Any person who violates any regula-

1 tion prescribed under section 361, 362, or 363, or any  
2 provision of section 366 or any regulation prescribed there-  
3 under, or who enters or departs from the limits of any quar-  
4 antine station, ground, or anchorage in disregard of quaran-  
5 tine rules and regulations or without permission of the  
6 quarantine officer in charge, shall be punished by a fine of  
7 not more than \$1,000 or by imprisonment for not more than  
8 one year, or both.

9 (b) Any vessel which violates section 364 or section  
10 366, or any regulations thereunder, or under section 367,  
11 or which enters within or departs from the limits of any  
12 quarantine station, ground, or anchorage in disregard of  
13 the quarantine rules and regulations or without permission  
14 of the officer in charge, shall forfeit to the United States  
15 not more than \$5,000, the amount to be determined by  
16 the court, which shall be a lien on such vessel, to be recov-  
17 ered by proceedings in the proper district court of the United  
18 States. In all such proceedings the United States district  
19 attorney shall appear on behalf of the United States; and all  
20 such proceedings shall be conducted in accordance with the  
21 rules and laws governing cases of seizure of vessels for vio-  
22 lation of the revenue laws of the United States.

23 (c) With the approval of the Administrator, the Surgeon  
24 General may, upon application therefor, remit or mitigate any  
25 forfeiture provided for under subsection (b) of this section,

1 and he shall have authority to ascertain the facts upon all  
2 such applications.

3 ADMINISTRATION OF OATHS

4 SEC. 369. Medical officers of the United States, when  
5 performing duties as quarantine officers at any port or place  
6 within the United States, are authorized to take declarations  
7 and administer oaths in matters pertaining to the administra-  
8 tion of the quarantine laws and regulations of the United  
9 States.

10 TITLE IV—NATIONAL CANCER INSTITUTE

11 TO BE A DIVISION IN NATIONAL INSTITUTE OF HEALTH

12 SEC. 401. The National Cancer Institute shall be a  
13 division in the National Institute of Health.

14 CANCER RESEARCH, AND SO FORTH

15 SEC. 402. In carrying out the purposes of section 301  
16 with respect to cancer the Surgeon General, through the  
17 National Cancer Institute and in cooperation with the Na-  
18 tional Cancer Advisory Council, shall—

19 (a) conduct, assist, and foster researches, investi-  
20 gations, experiments, and studies relating to the cause,  
21 prevention, and methods of diagnosis and treatment of  
22 cancer;

23 (b) promote the coordination of researches con-  
24 ducted by the Institute and similar researches conducted  
25 by other agencies, organizations, and individuals;



1 (c) provide training and instruction in technical  
2 matters relating to the diagnosis and treatment of cancer;

3 (d) provide fellowships in the Institute from funds  
4 appropriated or donated for such purpose;

5 (e) secure for the Institute consultation services and  
6 advice of cancer experts from the United States and  
7 abroad;

8 (f) cooperate with State health agencies in the  
9 prevention, control, and eradication of cancer;

10 (g) procure, use, and lend radium as provided in  
11 section 403.

12 ADMINISTRATION

13 SEC. 403. (a) In carrying out the provisions of section  
14 402 all appropriate provisions of section 301 shall be ap-  
15 plicable to the authority of the Surgeon General, and he is  
16 authorized—

17 (1) to purchase radium, from time to time, without  
18 regard to section 3709 of the Revised Statutes, to make  
19 such radium available for the purposes of this title, both  
20 to the Service and by loan to other agencies and institu-  
21 tions for such consideration and subject to such condi-  
22 tions as he may prescribe;

23 (2) to provide the necessary facilities where train-  
24 ing and instruction may be given in all technical matters  
25 relating to diagnosis and treatment of cancer to persons

1 found by the Surgeon General to have proper technical  
2 qualifications, and designated by him for such training  
3 or instruction, and to fix and pay them a per diem allow-  
4 ance during such training or instruction of not to exceed  
5 \$10.

6 (b) The Surgeon General shall recommend acceptance  
7 of conditional gifts pursuant to section 501 of this Act, for  
8 study, investigation, or research into the cause, prevention,  
9 and methods of diagnosis and treatment of cancer, or for the  
10 acquisition of grounds or for the erection, equipment, or main-  
11 tenance of premises, buildings, or equipment of the Institute,  
12 only after consultation with the National Cancer Advisory  
13 Council. Donations of \$50,000 or over in aid of research  
14 under this title may be acknowledged by the establishment  
15 within the Institute of suitable memorials to the donors.

16 (c) In carrying out the purposes of section 402 grants-  
17 in-aid for cancer projects shall be made only after review and  
18 recommendation of the National Cancer Advisory Council  
19 made pursuant to section 404.

#### 20 FUNCTIONS OF COUNCIL

21 SEC. 404. The council is authorized—

22 (a) to review research projects or programs sub-  
23 mitted to or initiated by it relating to the study of the  
24 cause, prevention, or methods of diagnosis and treatment  
25 of cancer, and certify approval to the Surgeon General,

1 for prosecution under section 402, of any such projects  
2 which it believes show promise of making valuable con-  
3 tributions to human knowledge with respect to the cause,  
4 prevention, or methods of diagnosis and treatment of  
5 cancer;

6 (b) to collect information as to studies which are  
7 being carried on in the United States or any other  
8 country as to the cause, prevention, and methods of  
9 diagnosis and treatment of cancer, by correspondence  
10 or by personal investigation of such studies, and with the  
11 approval of the Surgeon General make available such  
12 information through the appropriate publications for the  
13 benefit of health agencies and organizations (public or  
14 private), physicians, or any other scientists, and for  
15 the information of the general public;

16 (c) to review applications from any university,  
17 hospital, laboratory, or other institution whether public  
18 or private, or from individuals, for grants-in-aid for  
19 research projects relating to cancer, and certify to the  
20 Surgeon General its approval of grants-in-aid in the  
21 cases of such projects which show promise of making  
22 valuable contributions to human knowledge with respect  
23 to the cause, prevention, or methods of diagnosis or  
24 treatment of cancer;

25 (d) to recommend to the Surgeon General for

1 acceptance conditional gifts pursuant to section 501 of  
2 this Act; and

3 (c) to make recommendations to the Surgeon Gen-  
4 eral with respect to carrying out the provisions of this  
5 title.

#### 6 APPROPRIATIONS

7 SEC. 405. Appropriations to carry out the purposes of  
8 this title shall be available for the acquisition of land or the  
9 erection of buildings only if so specified, but in the absence  
10 of express limitation therein may be expended in the Dis-  
11 trict of Columbia for personal services, stenographic recording  
12 and translating services, by contract if deemed necessary,  
13 without regard to section 3709 of the Revised Statutes;  
14 traveling expenses (including the expenses of attendance at  
15 meetings when specifically authorized by the Surgeon Gen-  
16 eral) ; rental, supplies and equipment, purchase and exchange  
17 of medical books, books of reference, directories, periodicals,  
18 newspapers, and press clippings; purchase, operation, and  
19 maintenance of motor-propelled passenger-carrying vehicles;  
20 printing and binding (in addition to that otherwise provided  
21 by law) ; and for all other necessary expenses in carrying out  
22 the provisions of this title.

#### 23 OTHER WORK WITH RESPECT TO CANCER

24 SEC. 406. This title shall not be construed as limiting  
25 (1) the functions or authority of the Surgeon General or the



1 Public Health Service under any other title of this Act, or  
2 of any other officer or agency of the United States, relating  
3 to the study of the prevention, diagnosis, and treatment of  
4 cancer; or (2) the expenditure of money therefor.

## 5 TITLE V—MISCELLANEOUS

### 6 GIFTS

7 SEC. 501. (a) The Administrator is authorized to ac-  
8 cept on behalf of the United States gifts made uncondi-  
9 tionally by will or otherwise for the benefit of the  
10 Service or for the carrying out of any of its functions. Con-  
11 ditional gifts may be so accepted if recommended by the  
12 Surgeon General, and the principal of and income from any  
13 such conditional gift shall be held, invested, reinvested, and  
14 used in accordance with its conditions, but no gift shall be  
15 accepted which is conditioned upon any expenditure not to be  
16 met therefrom or from the income thereof unless such expen-  
17 diture has been approved by Act of Congress.

18 (b) Any unconditional gift of money accepted pursuant  
19 to the authority granted in subsection (a) of this section, the  
20 net proceeds from the liquidation (pursuant to subsection (c)  
21 or subsection (d) of this section) of any other property so  
22 accepted, and the proceeds of insurance on any such gift prop-  
23 erty not used for its restoration, shall be deposited in the  
24 Treasury of the United States and are hereby appropriated  
25 and shall be held in trust by the Secretary of the Treasury for

1 the benefit of the Service, and he may invest and reinvest  
2 such funds in interest-bearing obligations of the United States  
3 or in obligations guaranteed as to both principal and interest  
4 by the United States. Such gifts and the income from such  
5 investments shall be available for expenditure in the operation  
6 of the Service and the performance of its functions, subject  
7 to the same examination and audit as is provided for appro-  
8 priations made for the Service by Congress.

9 (c) The evidences of any unconditional gift of in-  
10 tangible personal property, other than money, accepted  
11 pursuant to the authority granted in subsection (a) of this  
12 section shall be deposited with the Secretary of the Treasury  
13 and he, in his discretion, may hold them, or liquidate them  
14 except that they shall be liquidated upon the request of the  
15 Administrator, whenever necessary to meet payments re-  
16 quired in the operation of the Service or the performance of  
17 its functions. The proceeds and income from any such  
18 property held by the Secretary of the Treasury shall be  
19 available for expenditure as is provided in subsection (b)  
20 of this section.

21 (d) The Administrator shall hold any real property or  
22 any tangible personal property accepted unconditionally pur-  
23 suant to the authority granted in subsection (a) of this sec-  
24 tion and he shall permit such property to be used for the  
25 operation of the Service and the performance of its functions

1 or he may lease or hire such property, and may insure such  
2 property, and deposit the income thereof with the Secretary  
3 of the Treasury to be available for expenditure as provided in  
4 subsection (b) of this section: *Provided*, That the income  
5 from any such real property or tangible personal property  
6 shall be available for expenditure in the discretion of the  
7 Administrator for the maintenance, preservation, or repair  
8 and insurance of such property and that any proceeds from  
9 insurance may be used to restore the property insured. Any  
10 such property when not required for the operation of the  
11 Service or the performance of its functions may be liquidated  
12 by the Administrator, and the proceeds thereof deposited  
13 with the Secretary of the Treasury, whenever in his judgment  
14 the purposes of the gifts will be served thereby.

15 USE OF IMMIGRATION STATION HOSPITALS

16 SEC. 502. The Immigration and Naturalization Service  
17 may, by agreement of the heads of the departments con-  
18 cerned, permit the Public Health Service to use hospitals at  
19 immigration stations for the care of Public Health Service  
20 patients. The Surgeon General shall reimburse the Immi-  
21 gration and Naturalization Service for the actual cost of  
22 furnishing fuel, light, water, telephone, and similar supplies  
23 and services, which reimbursement shall be covered into  
24 the proper Immigration and Naturalization Service appro-

1 priation, or such costs may be paid from working funds  
 2 established as provided by law, but no charge shall be  
 3 made for the expense of physical upkeep of the hospitals.  
 4 The Immigration and Naturalization Service shall reim-  
 5 burse the Surgeon General for the care and treatment of  
 6 persons detained in hospitals of the Public Health Service  
 7 at the request of the Immigration and Naturalization Service  
 8 unless such persons are entitled to care and treatment under  
 9 section 322 (a).

#### 10 MONEY COLLECTED FOR CARE OF PATIENTS

11 SEC. 503. Money collected as provided by law for ex-  
 12 penses incurred in the care and treatment of foreign seamen,  
 13 and money received for the care and treatment of pay pa-  
 14 tients, including any amounts received from any executive  
 15 department on account of care and treatment of pay patients,  
 16 shall be covered into the appropriation from which the  
 17 expenses of such care and treatment were paid.

#### 18 CARE OF PUBLIC HEALTH SERVICE PATIENTS AT SAINT 19 ELIZABETHS HOSPITAL

20 SEC. 504. Insane patients entitled to treatment by the  
 21 Service shall be admitted, upon order of the Administrator,  
 22 into Saint Elizabeths Hospital or, upon order of the Surgeon  
 23 General, into any hospital, institution, or station of the Serv-  
 24 ice especially equipped for the accommodation of such pa-



1 tients and shall be cared for and treated therein until cured  
2 or until ordered removed by the officer authorizing such  
3 admittance.

4                   SETTLEMENT OF CLAIMS

5       SEC. 505. The Administrator may consider, ascertain,  
6 adjust, and determine any claim which shall accrue, on ac-  
7 count of damages occasioned by collisions or incident to the  
8 operation of vessels of the Service, and for which damages  
9 such vessels are found by him to be responsible. To be con-  
10 sidered for settlement under this section, claims must be  
11 presented to the Administrator within one year of their  
12 accrual. The amount ascertained and determined to be due  
13 any claimant, not exceeding \$3,000 in any one case, shall be  
14 certified to Congress as a legal claim for payment out of  
15 appropriations that may be made therefor by Congress, to-  
16 gether with a brief statement of the character of each claim,  
17 the amount claimed, and the amount allowed. Acceptance  
18 by any claimant of the amount determined to be due under  
19 this section shall be deemed to be in full and final settlement  
20 of such claim against the Government of the United States.

21                   TRANSPORTATION OF REMAINS OF OFFICERS

22       SEC. 506. Appropriations available for traveling ex-  
23 penses of the Service shall be available for meeting the cost of  
24 preparation for burial and of transportation to the place of

1 burial of remains of commissioned officers, and of personnel  
2 specified in regulations, who die in line of duty.

3 SETTLEMENT OF ACCOUNTS OF DECEASED OFFICERS

4 SEC. 507. (a) In the settlement of the accounts of de-  
5 ceased commissioned officers where the amount due the de-  
6 cedent's estate is less than \$1,000 and no demand is presented  
7 by a duly appointed representative of the estate, the account-  
8 ing officers may allow the amount found due to the decedent's  
9 widow or legal heirs in the following order of precedence:  
10 First, to the widow; second, if the decedent left no widow,  
11 or the widow be dead at time of settlement, then to the chil-  
12 dren or their issue, per stirpes; third, if no widow or children  
13 or their issue, then to the father and mother in equal parts,  
14 provided the father has not abandoned the support of his  
15 family, in which case to the mother alone; fourth, if either  
16 the father or mother be dead, then to the one surviving;  
17 fifth, if there be no widow, child, father, or mother at the  
18 date of settlement, then to the brothers and sisters and chil-  
19 dren of deceased brothers and sisters, per stirpes.

20 (b) Subsection (a) shall not be construed so as to pre-  
21 vent payment of funeral expenses from the amount due the de-  
22 cedent's estate if a claim therefor is presented, before settle-  
23 ment by the accounting officers, by the person or persons who  
24 actually paid such expenses.

## TRANSFER OF FUNDS

1

2       SEC. 508. For the purpose of any reorganization under  
3 section 202, the Administrator, with the approval of the  
4 Director of the Bureau of the Budget, is authorized to  
5 make such transfers of funds between appropriations as may  
6 be necessary for the continuance of transferred functions.

7

## AVAILABILITY OF APPROPRIATIONS

8       SEC. 509. Appropriations for carrying out the pro-  
9 visions of section 301 shall be available for expenditure for  
10 personal services and rent at the seat of Government, for  
11 books of reference, periodicals, and exhibits, and for print-  
12 ing and binding.

13

## UNAUTHORIZED WEARING OF UNIFORMS

14       SEC. 510. Except as may be authorized by regulations  
15 of the President, the insignia and uniform of commissioned  
16 officers of the Service, or any distinctive part of such insignia  
17 or uniform, or any insignia or uniform any part of which is  
18 similar to a distinctive part thereof, shall not be worn, after  
19 the promulgation of such regulations, by any person other  
20 than a commissioned officer of the Service, and any person  
21 violating this section shall be subject to the penalties provided  
22 by the Act of June 3, 1916, as amended (U. S. C., 1940  
23 edition, title 10, sec. 1393), in the case of unlawful wearing  
24 of the uniform of commissioned officers of the Army.

## ANNUAL REPORT

SEC. 511. The Surgeon General shall transmit to the Administrator, for submission to the Congress at the beginning of each regular session, a full report of the administration of the functions of the Service under this Act, including a detailed statement of receipts and disbursements.

TITLE VI—TEMPORARY AND EMERGENCY PROVISIONS AND AMENDMENTS AND REPEALS

EXISTING POSITIONS, PROCEDURES, AND SO FORTH

SEC. 601. (a) The provisions of this Act shall not affect the term or tenure of office or employment of the Surgeon General, or of any officer or employee of the Service, or of any member of the National Advisory Health Council or the National Advisory Cancer Council, in office or employed at the time of its enactment.

(b) Notwithstanding the provisions of this Act, existing positions, divisions, committees, and procedures in the Service shall continue unless and until abolished, changed, or transferred pursuant to authority granted in this Act.

EXISTING REGULATIONS, AND SO FORTH

SEC. 602. Notwithstanding the provisions of this Act, existing rules, regulations of or applicable to the Service, and Executive orders, shall remain in effect until repealed, or until modified or superseded by regulations made in accordance with the provisions of this Act.



## 1 FUNDS, APPROPRIATIONS, AND PROPERTY

2 SEC. 603. All appropriations, allocations, and other  
3 funds, and all properties available for use by the Public  
4 Health Service or any division or unit thereof shall con-  
5 tinue to be available to the Service.

## 6 APPROPRIATIONS FOR EMERGENCY HEALTH AND

## 7 SANITATION ACTIVITIES

8 SEC. 604. For each fiscal year during the continuance of  
9 the present war and during any period of demobilization after  
10 the war, there is hereby authorized to be appropriated such  
11 sum as may be necessary to enable the Surgeon General,  
12 either directly or through State health authorities, to conduct  
13 health and sanitation activities in areas adjoining military  
14 or naval reservations within or without the United States,  
15 in areas where there are concentrations of military or naval  
16 forces, in Government and private industrial plants engaged  
17 in defense work, and in areas adjoining such industrial plants.

## 18 EMPLOYEES' COMPENSATION

19 SEC. 605. (a) Section 7 of the Act of September 7,  
20 1916, entitled "An Act to provide compensation for employ-  
21 ees of the United States suffering injuries while in the per-  
22 formance of their duties, and for other purposes", as amended  
23 (U. S. C., 1940 edition, title 5, sec. 757), is amended by  
24 changing the period at the end thereof to a colon and adding  
25 the following: "*Provided*, That whenever any person is en-

1 titled to receive any benefits under this Act by reason of his  
2 injury, or by reason of the death of an employee, as defined  
3 in section 40, and is also entitled to receive from the United  
4 States any payments or benefits (other than the proceeds of  
5 any insurance policy), by reason of such injury or death under  
6 any other Act of Congress, because of service by him (or in  
7 the case of death, by the deceased) as an employee, as so  
8 defined, such person shall elect which benefits he shall re-  
9 ceive. Such election shall be made within one year after the  
10 injury or death, or such further time as the Commission may  
11 for good cause allow, and when made shall be irrevocable  
12 unless otherwise provided by law.”

13 (b) The definition of the term “employee” in section  
14 40 of such Act of September 7, 1916, as amended (U. S. C.,  
15 1940 edition, title 5, sec. 790), is amended to read as  
16 follows:

17 “The term ‘employee’ includes all civil employees of the  
18 United States and of the Panama Railroad Company, com-  
19 missioned officers of the Regular Corps of the Public Health  
20 Service, officers in the Reserve of the Public Health Service  
21 on active duty, and all persons, other than independent con-  
22 tractors and their employees, employed on the Menominee  
23 Indian Reservation in the State of Wisconsin, subsequent to  
24 September 7, 1916, in operations conducted pursuant to the  
25 Act entitled ‘An Act to authorize the cutting of timber, the

1 manufacture and sale of lumber, and the preservation of the  
2 forests on the Menominee Indian Reservation in the State of  
3 Wisconsin,' approved March 28, 1908, as amended, or any  
4 other Act relating to tribal timber and logging operations on  
5 the Menominee Reservation."

6 (c) In the case of injury or death of a commissioned  
7 officer of the Service occurring after November 10, 1943,  
8 and on or before the date of the termination of the present  
9 war, the election required by section 7 of such Act of Sep-  
10 tember 7, 1916, as amended (U. S. C., 1940 edition, title  
11 5, sec. 757), may be made, and the notice required by  
12 section 15 thereof and the written claim required by section  
13 18 thereof may be filed, within such time as may be  
14 provided by regulations of the United States Employees'  
15 Compensation Commission, but not later than the expiration  
16 of one year following the termination of the present war.  
17 Prior to the expiration of such year any such election may  
18 be revised, and such revision shall operate retroactively  
19 to the date of death or injury, but there shall be deducted  
20 from the compensation or other benefit payable pursuant  
21 to a revised election any sum (except the proceeds of any  
22 insurance policy) theretofore paid on account of such  
23 death or injury.

24 (d) In the case of death of a commissioned officer  
25 of the Service which occurred after December 7, 1941,

1 and prior to November 11, 1943, the rights provided to  
2 surviving beneficiaries by section 10 of the Public Health  
3 Service Act of 1943 shall continue notwithstanding the  
4 repeal of that Act. Such beneficiaries, in addition to the  
5 right to receive six months' pay, shall have the same right  
6 of election and of revising elections as is provided by sub-  
7 section (c) of this section, except that in case of a revised  
8 election no deduction shall be made on account of such six  
9 months' pay.

10 COMPUTATION OF RETIRED PAY IN CERTAIN CASES

11 SEC. 606. In the case of commissioned officers of the  
12 Service appointed prior to the enactment of this Act, there  
13 shall be included, in determining retired pay pursuant to  
14 section 211 (c) (1), noncommissioned service in the Public  
15 Health Service, as well as all commissioned service.

16 ALLOWANCES FOR UNIFORMS TO CERTAIN COMMISSIONED  
17 PERSONNEL

18 SEC. 607. Each commissioned officer of the Service who  
19 was appointed to the Regular Corps or called to active duty  
20 in the Reserve Corps since December 7, 1941, and prior to  
21 the enactment of this Act, and who on or after November  
22 11, 1943, was on active duty in the grade of junior assistant,  
23 assistant, or passed assistant and was receiving the pay of the  
24 first, second, or third pay period, shall be entitled to receive  
25 an allowance of \$250 for uniforms and equipment.



1 PATIENTS OF SAINT ELIZABETH'S HOSPITAL IN PUBLIC  
2 HEALTH SERVICE HOSPITALS

3 SEC. 608. Insane patients entitled to treatment in Saint  
4 Elizabeth's Hospital who may heretofore or hereafter, during  
5 the continuance of the present war, or during the period of  
6 six months thereafter, have been admitted to hospitals of the  
7 Service, may continue to be cared for and treated in such  
8 hospitals notwithstanding the termination of such period.

9 ELIGIBILITY OF OSTEOPATHS TO APPOINTMENT IN THE  
10 RESERVE CORPS

11 SEC. 609. For the duration of the present war and for  
12 six months thereafter graduates of reputable osteopathic col-  
13 leges shall be eligible for appointment as reserve officers in  
14 the Service.

15 TEMPORARY PROVISIONS RESPECTING MEDICAL AND  
16 HOSPITAL BENEFITS

17 SEC. 610. (a) Subject to regulations of the President,  
18 members of the Women's Reserve of the Coast Guard, or  
19 their dependents, shall be entitled to the benefits provided  
20 by section 326 for male officers and enlisted men of the  
21 Coast Guard or their dependents: *Provided*, That the hus-  
22 bands of such members shall not be considered dependents,  
23 and the children of such members shall not be considered  
24 dependents unless their father is dead or they are in fact  
25 dependent on their mother for their chief support.

1       (b) Subject to regulations of the President, lightkeepers  
 2 and assistant lightkeepers (who during their active service  
 3 were entitled to medical relief at hospitals and other sta-  
 4 tions of the Public Health Service), and officers and crews  
 5 of vessels of the former Lighthouse Service, who have been  
 6 or who may hereafter be retired under the provisions of  
 7 section 6 of the Act of June 20, 1918, as amended (U. S. C.,  
 8 1940 edition, title 33, sec. 763), shall be entitled to medical,  
 9 surgical, and dental treatment and hospitalization by the  
 10 Public Health Service.

#### 11                               REPEAL OF EXISTING LAW

12       SEC. 611. The following statutes or parts of statutes  
 13 are hereby repealed:

14       Section 3689 in title XLI, and sections 4801, 4802,  
 15 4803, 4804, 4805, and 4806 in title LIX of the Revised  
 16 Statutes of the United States;

17       The last paragraph under the heading "Miscellaneous"  
 18 in chapter 130, 18 Statutes at Large 371, which paragraph  
 19 is the seventh beginning on page 377;

20       Chapter 156, 18 Statutes at Large 485;

21       Chapter 66, 20 Statutes at Large 37;

22       Chapter 202, 20 Statutes at Large 484;

23       Chapter 61, 21 Statutes at Large 46;

24       Section 1, and the final clause of section 2 (which reads  
 25 as follows: "and the said quarantine stations when so estab-

lished shall be conducted by the Marine Hospital Service under regulations framed in accordance with the Act of April twenty-ninth, eighteen hundred and seventy-eight"), of chapter 727, 25 Statutes at Large 355;

Chapter 19, 25 Statutes at Large 639;

Chapter 51, 26 Statutes at Large 31;

The last sentence of the paragraph headed "Office of the Supervising Surgeon General, Marine Hospital Service" in chapter 541, 26 Statutes at Large 908, which appears at page 923 and reads as follows: "And hereafter, the Supervising Surgeon General is hereby authorized to cause the detail of two surgeons and two passed assistant surgeons for duty in the Bureau, who shall each receive the pay and allowances of their respective grades in the general service.";

Chapter 114, 27 Statutes at Large 449;

The last sentence of the paragraph headed "Office of Supervising Surgeon General, Marine Hospital Service", in chapter 174, 28 Statutes at Large 162, which appears at page 179 and which reads as follows: "And hereafter the Supervising Surgeon General of the Marine Hospital Service is hereby authorized to cause the detail of an additional medical officer and one hospital steward for duty in the Bureau, who shall each receive the pay and allowances of his respective grade in the general service.";

Chapter 213, 28 Statutes at Large 229;

1 Chapter 300, 28 Statutes at Large 372;

2 The last sentence of the paragraph headed "Office of  
3 Supervising Surgeon General, Marine Hospital Service", in  
4 chapter 177, 28 Statutes at Large 764, which appears at  
5 page 780 and which reads as follows: "And hereafter the  
6 Supervising Surgeon General of the Marine Hospital Service  
7 is hereby authorized to cause the detail of two hospital-at-  
8 tendants from the port of New York for duty in the labora-  
9 tory of the Bureau, and who shall each receive the pay  
10 equivalent to the compensation of a first-class hospital  
11 attendant.";

12 The proviso at the end of the paragraph headed "Office  
13 of Supervising Surgeon-General Marine-Hospital Service" in  
14 chapter 265, 29 Statutes at Large 538, which appears at  
15 page 554 and which reads as follows: "*Provided*, That the  
16 Secretary of the Treasury is hereby authorized, in his discre-  
17 tion, to grant to the medical officers of the Marine-Hospital  
18 Service commissioned by the President, without deduction  
19 of pay, leaves of absence for the same period of time and in  
20 the same manner as is now authorized to be granted to  
21 officers of the Army by the Secretary of War";

22 Chapter 349, 30 Statutes at Large 976;

23 Section 10, chapter 191, 31 Statutes at Large 77, at  
24 page 80;



1       The first paragraph of section 97 of chapter 339, 31  
2 Statutes at Large 141;

3       Chapter 836, 31 Statutes at Large 1086;

4       That portion of the third paragraph of section 84 of  
5 chapter 1369, 32 Statutes at Large 691, which appears at  
6 page 711 and which reads as follows: "and the provisions  
7 of law relating to the public health and quarantine shall  
8 apply in the case of all vessels entering a port of the United  
9 States or its aforesaid possessions from said islands, where  
10 the customs officers at the port of departure shall perform  
11 the duties required by such law of consular officers in  
12 foreign ports";

13       Chapter 1370, 32 Statutes at Large 712;

14       Chapter 1378, 32 Statues at Large 728;

15       Chapter 1443, 33 Statues at Large 1009;

16       The last sentence of the last paragraph under the heading  
17 "Public Health and Marine Hospital Service" in chapter  
18 1484, 33 Statutes at Large 1214, which appears at page  
19 1217 and which reads as follows: "And the Secretary of the  
20 Treasury shall, for the fiscal year nineteen hundred and seven,  
21 and annually thereafter, submit to Congress, in the regular  
22 Book of Estimates, detailed estimates of the expenses of  
23 maintaining the Public Health and Marine Hospital  
24 Service,";

1       Public Resolution Numbered 21, 33 Statutes at Large  
2 1283;

3       Chapter 3433, 34 Statutes at Large 299;

4       Section 17 of chapter 1134, 34 Statutes at Large 898,  
5 at page 903;

6       That portion of the third paragraph under the heading  
7 “Back Pay and Bounty” in chapter 200, 35 Statutes at Large  
8 373, as amended by chapter 213, 52 Statutes at Large 352,  
9 which is at page 352 of 52 Statutes at Large and which reads  
10 as follows: “and of deceased commissioned officers of the  
11 Public Health Service”;

12       The proviso in the tenth paragraph under the heading  
13 “Public Health and Marine Hospital Service” in chapter  
14 285, 36 Statutes at Large 1363, which appears in the eighth  
15 paragraph on page 1394 and which reads as follows: “*Pro-*  
16 *vided*, That there may be admitted into said hospitals, for  
17 study, persons with infectious or other diseases affecting  
18 the public health, and not to exceed ten cases in any one  
19 hospital at one time”, and the substantially similar pro-  
20 visions appearing under the heading “Public Health and  
21 Marine Hospital Service” or the heading “Public Health  
22 Service” in the following statutes: Chapter 355, 37 Statutes  
23 at Large 417, at page 435; chapter 3, 38 Statutes at  
24 Large 4, at page 24; chapter 209, 39 Statutes at Large  
25 262, at page 278; chapter 28, 40 Statutes at Large 459,

1 at page 468; chapter 113, 40 Statutes at Large 634, at  
2 page 644; chapter 24, 41 Statutes at Large 163, at page  
3 175;

4 Chapter 288, 37 Statutes at Large 309;

5 The proviso at the end of the last paragraph under the  
6 heading "Public Health Service" in chapter 149, 37 Statutes  
7 at Large 912, which appears at page 915 and which reads  
8 as follows: "*Provided*, That hereafter the director of the  
9 Hygienic Laboratory shall receive the pay and allowances  
10 of a senior surgeon";

11 That portion of the second paragraph under the heading  
12 "Public Health Service" in chapter 3, 38 Statutes at Large  
13 4, which appears at page 23 and which reads as follows:  
14 "at least six of the assistant surgeons provided for hereunder  
15 shall be required to have had a special training in the  
16 diagnosis of insanity and mental defect for duty in connec-  
17 tion with the examination of arriving aliens with special  
18 reference to the detection of mental defection,";

19 The proviso at the end of the twelfth paragraph under  
20 the heading "Public Health Service" in chapter 3, 38 Stat-  
21 utes at Large 4, which appears at page 24 and which reads as  
22 follows: "*Provided*, That hereafter commissioned officers and  
23 pharmacists, and those employees of the Service devoting all  
24 their time to field work, shall be entitled to hospital relief  
25 when taken sick or injured in line of duty";

1       The last clause of chapter 124, 38 Statutes at Large 387,  
2       which reads as follows: "and the said Secretary is hereby  
3       authorized to detail for duty on revenue cutters such sur-  
4       geons and other persons of the Public Health Service as he  
5       may deem necessary";

6       Section 5 of chapter 414, 39 Statutes at Large 536, at  
7       page 538;

8       Chapter 26, 39 Statutes at Large 872;

9       That portion of section 16 of chapter 29, 39 Statutes at  
10      Large 874, which appears at page 885 and which reads as  
11      follows: "who shall have had at least two years' experience  
12      in the practice of their profession since receiving the degree  
13      of doctor of medicine, and";

14      The sixth paragraph under the heading "Public Health  
15      Service" in chapter 3, 40 Statutes at Large 2, at page 6;

16      The seventh paragraph under the heading "Bureau of  
17      Mines" in chapter 27, 40 Statutes at Large 105, which is  
18      the third full paragraph appearing on page 146;

19      Chapter 37, 40 Statutes at Large 242;

20      The proviso in the fourth paragraph under the heading  
21      "Public Health Service" in chapter 113, 40 Statutes at  
22      Large 634, which appears at page 644 and which reads as  
23      follows: "*Provided*, That the pay of attendants at marine  
24      hospitals, quarantine, and immigration stations, whose pres-  
25      ent compensation is less than the rate of \$1,200 per annum,



1 may be increased to a rate not to exceed \$1,200 per  
2 annum”;

3       The proviso in the eleventh paragraph under the head-  
4 ing “Public Health Service” in chapter 113, 40 Statutes at  
5 Large 634, which appears at page 644 and which reads as  
6 follows: “*Provided*, That the Public Health Service, from  
7 and after July first, nineteen hundred and eighteen, shall  
8 pay to Saint Elizabeths Hospital the actual per capita cost of  
9 maintenance in the said hospital of patients committed by  
10 that Service”;

11       The sixtieth paragraph under the heading “Bureau of  
12 Fisheries” in chapter 113, 40 Statutes at Large 634, which  
13 is the fourth full paragraph appearing on page 694;

14       Sections 1, 3, 4, 6, and 7 of chapter XV of chapter 143,  
15 40 Statutes at Large 845, at page 886;

16       The thirteenth paragraph under the heading “General  
17 Expenses, Bureau of Chemistry” in chapter 178, 40 Statutes  
18 at Large 973, which is the second full paragraph appearing  
19 on page 992;

20       Section 2 of chapter 179, 40 Statutes at Large 1008;

21       Chapter 196, 40 Statutes at Large 1017;

22       Chapter 98, 40 Statutes at Large 1302;

23       The last paragraph under the heading “Public Health  
24 Service” in chapter 6, 41 Statutes at Large 35, which is the  
25 sixth full paragraph appearing on page 45;

1       The proviso at the end of the first paragraph under the.  
2 heading "Public Health Service" in chapter 94, 41 Statutes  
3 at Large 503, which appears at page 507, and which reads  
4 as follows: "*Provided*, That the Secretary of the Treasury  
5 is authorized to make regulations governing the disposal of  
6 articles produced by patients in the course of their curative  
7 treatment, either by allowing the patient to retain same or  
8 by selling the articles and depositing the money received to  
9 the credit of the appropriation from which the materials for  
10 making the articles were purchased";

11       The second paragraph under the heading "Public Health  
12 Service" in chapter 94, 41 Statutes at Large 503, which is  
13 the seventh full paragraph appearing on page 507;

14       The last paragraph under the heading "Public Health  
15 Service" in chapter 94, 41 Statutes at Large 503, which is  
16 the seventh full paragraph appearing on page 508, and the  
17 substantially similar provisions in chapter 161, 41 Statutes  
18 at Large 1367, at page 1378;

19       The fourth paragraph under the heading "Quarantine  
20 Stations" in chapter 235, 41 Statutes at Large 874, which is  
21 the eighth full paragraph appearing on page 875;

22       The third paragraph under the heading "Public Health  
23 Service" in chapter 235, 41 Statutes at Large 874, which  
24 is the ninth full paragraph appearing on page 883;

25       Chapter 80, 41 Statutes at Large 1149;

1       The second paragraph under the heading "Public Health  
2 Service" in chapter 23, 42 Statutes at Large 29, which is  
3 the thirteenth full paragraph appearing on page 38;

4       The proviso at the end of section 4 of chapter 57, 42  
5 Statutes at Large 147, which appears at page 148, and which  
6 reads as follows: "*Provided*, That all commissioned personnel  
7 detailed or hereafter detailed from the United States Public  
8 Health Service to the Veterans' Bureau, shall hold the same  
9 rank and grade, shall receive the same pay and allowances,  
10 and shall be subject to the same rules for relative rank and  
11 promotion as now or hereafter may be provided by law for  
12 commissioned personnel of the same rank or grade or per-  
13 forming the same or similar duties in the United States Pub-  
14 lic Health Service";

15       The ninth paragraph under the heading "Bureau of  
16 Mines", in chapter 199, 42 Statutes at Large 552, which is  
17 the fourth full paragraph on page 588, and the substantially  
18 similar provisions in chapter 42, 42 Statutes at Large 1174,  
19 at page 1210; chapter 264, 43 Statutes at Large 390, at  
20 page 422; chapter 462, 43 Statutes at Large 1141, at page  
21 1175;

22       The last sentence of the paragraph under the heading  
23 "Public Health Service" in chapter 258, 42 Statutes at Large  
24 767, which appears at page 776 and which reads as follows:  
25 "The Immigration Service shall reimburse the Public Health

1 Service on the basis of per capita rates fixed by the Secre-  
2 tary of the Treasury and the sums received by the Public  
3 Health Service from this source shall be covered into the  
4 Treasury as miscellaneous receipts”;

5       The first proviso at the end of the ninth paragraph under  
6 the heading “Public Health Service” in chapter 84, 43  
7 Statutes at Large 64, which appears at page 75 and which  
8 reads as follows: “*Provided*, That the Immigration Service  
9 shall permit the Public Health Service to use the hospitals  
10 at Ellis Island Immigration Station for the care of the  
11 Public Health Service patients, free of expense for physi-  
12 cal upkeep, but with a charge of actual cost for fuel, light,  
13 water, telephone, and similar supplies and services, to be  
14 covered into the proper Immigration Service appropria-  
15 tions; and moneys collected by the Immigration Service  
16 on account of hospital expenses of persons detained under  
17 the immigration laws and regulations at Ellis Island Immi-  
18 gration Station shall be covered into the Treasury as  
19 miscellaneous receipts.”,

20 and substantially similar provisions under the heading “Public  
21 Health Service” in chapter 87, 43 Statutes at Large 763,  
22 at page 775; chapter 43, 44 Statutes at Large 136, at  
23 page 147; chapter 126, 45 Statutes at Large 162, at page  
24 174; chapter 39, 45 Statutes at Large 1028, at page 1039;  
25 chapter 289, 46 Statutes at Large 335, at page 347; chapter



1 110, 49 Statutes at Large 218, at page 229; chapter 725,  
 2 49 Statutes at Large 1827, at page 1839; chapter 180, 50  
 3 Statutes at Large 137, at page 149; chapter 55, 52 Statutes  
 4 at Large 120, at page 133; chapter 428, 54 Statutes at Large  
 5 574, at page 585; chapter 269, 55 Statutes at Large 466, at  
 6 page 481; and chapter 475, 56 Statutes at Large 562, at  
 7 page 581;

8 Chapter 146, 43 Statutes at Large 809;

9 The words "and public health" in the last sentence of  
 10 section 7 (b) of chapter 344, 44 Statutes at Large 568, at  
 11 page 572;

12 The words "or public-health" wherever they appear in  
 13 the second sentence of section 11 (b) of chapter 344, 44  
 14 Statutes at Large 568, at page 574, as amended;

15 Section 3 of chapter 371, 44 Statutes at Large 622, at  
 16 page 626;

17 Chapter 625, 45 Statutes at Large 603;

18 The proviso at the end of the fifth paragraph under the  
 19 heading "Public Health Service" in chapter 39, 45 Statutes  
 20 at Large 1028, which appears at page 1039, and which reads  
 21 as follows: "*Provided*, That funds expendable for transpor-  
 22 tation and traveling expenses may also be used for prepara-  
 23 tion for shipment and transportation to their former homes  
 24 of remains of officers who die in line of duty",  
 25 and substantially similar provisions appearing under the

1 heading "Public Health Service" in chapter 289, 46 Statutes  
 2 at Large 335, at page 346; chapter 110, 49 Statutes at Large  
 3 218, at page 228; chapter 180, 50 Statutes at Large 137, at  
 4 page 148; chapter 55, 52 Statutes at Large 120, at page 132;  
 5 chapter 428, 54 Statutes at Large 574, at page 584; chap-  
 6 ter 269, 55 Statutes at Large 466, at page 480;

7 Chapter 82, 45 Statutes at Large 1085;

8 The second paragraph under the heading "Government  
 9 in the Territories" in chapter 707, 45 Statutes at Large 1623,  
 10 which is the seventh full paragraph on page 1644;

11 So much of chapter 70, 46 Statutes at Large 81, as  
 12 reads: " , and at his discretion to permit the erection of other  
 13 buildings which may in the future be donated to promote  
 14 the welfare of patients and personnel";

15 Chapter 125, 46 Statutes at Large 150;

16 Chapter 320, 46 Statutes at Large 379;

17 Section 4 of chapter 488, 46 Statutes at Large 585;

18 Chapter 597, 46 Statutes at Large 807;

19 Chapter 409, 46 Statutes at Large 1491;

20 The words "or public health" in the last sentence of  
 21 section 2 of chapter 656, 48 Statutes at Large 1116;

22 The ninth paragraph under the heading "Public Health  
 23 Service" in chapter 110, 49 Statutes at Large 218, which is  
 24 the second full paragraph appearing on page 229;

1 Title VI of chapter 531, 49 Statutes at Large 620, at  
2 page 634;

3 Chapter 161, 49 Statutes at Large 1185;

4 That portion of chapter 550, 49 Statutes at Large 1514,  
5 which reads as follows: "or of the United States Public  
6 Health Service";

7 The proviso at the end of the thirteenth paragraph under  
8 the heading "Public Health Service" in chapter 725, 49  
9 Statutes at Large 1827, which appears at page 1840 and  
10 which reads as follows: "*Provided*, That on and after July 1,  
11 1936, the Narcotic Farm at Lexington, Kentucky, shall be  
12 known as United States Public Health Service Hospital,  
13 Lexington, Kentucky, but such change in designation shall  
14 not affect the status of any person in connection therewith  
15 or the status of such institution under any Act applicable  
16 thereto";

17 The fourth paragraph under the heading "Public Health  
18 Service" in chapter 180, 50 Statutes at Large 137, which is  
19 the sixth full paragraph on page 148;

20 Section 2 of chapter 545, 50 Statutes at Large 547;

21 Chapter 565, 50 Statutes at Large 559;

22 The first proviso in the paragraph having the subhead  
23 "Division of Mental Hygiene" under the heading "Public  
24 Health Service" in chapter 55, 52 Statutes at Large 120,  
25 which appears at page 134 and which reads as follows:

1 “*Provided*, That on and after July 1, 1938, the United States  
 2 Narcotic Farm, Fort Worth, Texas, shall be known as  
 3 United States Public Health Service Hospital of Fort Worth,  
 4 Texas, but such change in designation shall not affect the  
 5 status of any person in connection therewith or the status  
 6 of such institution under any Act applicable thereto:”;

7 Chapter 267, 52 Statutes at Large 439;

8 Chapter 92, 53 Statutes at Large 620;

9 Chapter 606, 53 Statutes at Large 1266;

10 Chapter 636, 53 Statutes at Large 1338;

11 Section 509 of chapter 666, 53 Statutes at Large 1360,  
 12 at page 1381;

13 Section 205 (b) of Reorganization Plan Numbered I,  
 14 53 Statutes at Large 1423, at page 1425;

15 Chapter 566, 54 Statutes at Large 747;

16 The fourth paragraph under the heading “Public Health  
 17 Service” in Public Law 11, Seventy-eighth Congress, at  
 18 page 4; and

19 Public Law 184, Seventy-eighth Congress.

20 PRESERVATION OF RIGHTS AND LIABILITIES

21 SEC. 612. The repeal of the several statutes or parts  
 22 of statutes accomplished by section 611 shall not affect any  
 23 act done, or any right accruing or accrued, or any suit or  
 24 proceeding had or commenced in any civil cause, before  
 25 such repeal, but all rights and liabilities under the statutes



1 or parts thereof so repealed shall continue, and may be  
2 enforced in the same manner, as if such repeal had not been  
3 made.



78TH CONGRESS  
2D SESSION

H. R. 4624

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## A BILL

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To consolidate and revise the laws relating to the Public Health Service, and for other purposes.

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By Mr. BUTWINKLE

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APRIL 18, 1944

Referred to the Committee on Interstate and Foreign  
Commerce







I am sorry to say that 5 of the 224 defeating votes were from Wisconsin.

The gentleman who wrote that letter is somewhere in New Guinea, and his name is alleged to be A. C. Stikl. From this insertion it is safe to assume that the gentleman who offered the extension was in accord with the idea expressed by the writer.

In order to keep the record straight, I want to speak, of course, for my own family. I might say, in passing, however, that so far as the gentlemen from Wisconsin [Mr. STEVENSON and Mr. O'KONSKI] are concerned, they have no members eligible for the service. I do know that so far as the gentleman from Wisconsin [Mr. KEEFE] is concerned, he has three children: A boy who at the present time is in the service, and two daughters who are married to young men, one of whom is serving in the Southwest Pacific and the other in the Navy on Atlantic patrol duty. I know, as a matter of fact, that the only member of the gentleman from Wisconsin's [Mr. MURRAY] family who is eligible for military service is in the military service and has been for more than 5 years.

As to my own family, what I have to say about it is with considerable humility. There are three children in my family. My oldest child, a daughter, is with the American Red Cross and is today serving in India. My second daughter is married, and her husband has served for 2 years in the military service. My only son has served in New Guinea for 26 months.

I submit to you that that is the answer to this scurrilous letter, and I further submit to you Members of this House that we should not be compelled to defend ourselves from the floor of this House against the act of a colleague who ought to have known better.

Mr. SPRINGER. Mr. Speaker, will the gentleman yield?

Mr. SMITH of Wisconsin. I yield to the gentleman from Indiana.

Mr. SPRINGER. I wish to compliment the gentleman on the statement he has just made, and to make this further observation: The distinguished gentleman who now has the floor served in World War No. 1 for almost 20 months overseas. He also served as department commander of the American Legion in his own State of Wisconsin. Not only that, but he served as national executive committeeman from the State of Wisconsin for that great peacetime organization, the American Legion.

May I say further that at the present moment the wife of the distinguished gentleman from Wisconsin is now serving as national president of the American Legion Auxiliary for the United States of America.

I know what the gentleman did with respect to the soldiers' vote bill. He did everything within his power to obtain the right for every soldier and every sailor to cast a full and unlimited vote for his choice of all candidates for all offices. I wish to compliment the distinguished gentleman who is now speaking and the other Members from the great State of Wisconsin, who did likewise.

Mr. O'KONSKI. Mr. Speaker, will the gentleman yield?

Mr. SMITH of Wisconsin. I yield to the gentleman from Wisconsin.

Mr. O'KONSKI. May I point out that I checked the RECORD, and this Representative from Wisconsin [Mr. McMURRAY], who put that letter in the RECORD, and who purports to be such a great friend of the men in the service, was not even present to vote when the soldier vote bill came up for a vote.

Mr. SMITH of Wisconsin. I thank the gentleman for that observation.

Mr. EDWIN ARTHUR HALL. Mr. Speaker, will the gentleman yield?

Mr. SMITH of Wisconsin. I yield to the gentleman from New York.

Mr. EDWIN ARTHUR HALL. Am I not correct in stating that the distinguished gentleman from Wisconsin who now has the floor is the one who introduced a bill providing for the education of the returning servicemen of World War No. 2?

Mr. SMITH of Wisconsin. That is right.

Mr. EDWIN ARTHUR HALL. It seems to me that criticism of the gentleman from Wisconsin comes with poor grace from one who apparently is not familiar with his record.

Mr. AUGUST H. ANDRESEN. Mr. Speaker, will the gentleman yield?

Mr. SMITH of Wisconsin. I yield to the gentleman from Minnesota.

Mr. AUGUST H. ANDRESEN. I do not know what purpose the gentleman from Wisconsin [Mr. McMURRAY] had in putting this letter into the RECORD, but I wish the gentleman who is now speaking would insert in the RECORD the military record of the gentleman who inserted that letter.

Mr. SMITH of Wisconsin. For the gentleman's information and the information of the House, he has none, and I believe that he is eligible for service in this war.

Mr. MURRAY of Wisconsin. Mr. Speaker, I ask unanimous consent to address the House for 5 minutes.

The SPEAKER. Is there objection to the request of the gentleman from Wisconsin?

There was no objection.

Mr. MURRAY of Wisconsin. I know our colleague the gentleman from Wisconsin [Mr. SMITH] has told you the record of the sons of the Republican Members of Congress. I usually do not stand up here and try to wave the flag, but I just want to take this opportunity to tell some of my boy friends that if this is the opening gun for this coming campaign they can choose their own weapons and name their own poison.

My son happened to be down in Panama the day Pearl Harbor was attacked. You can imagine how anyone would feel with the papers and the radio saying all the time that it was expected that the Panama Canal was going to be the next point of attack by the Japanese. You can also imagine how one felt the day we, of necessity, had to pass the bill that provided that these boys who had made a contract to go in the Army or the Navy for 4 years should stay in the service as long as the war might last.

This war is pretty serious and life is pretty serious to most people. I have noticed that anyone in this body who has lost a son in this war, like our distinguished colleagues, the gentleman from Georgia [Mr. BROWN] and the gentleman from Maryland [Mr. BALDWIN], or anyone who has a son in the service, is not sitting around on this floor skinning his teeth like a Cheshire cat and making himself ridiculous before the Members of this House.

#### LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to Mr. SHERIDAN (at the request of Mr. EBERHARTER) for 7 days, on account of illness.

#### ENROLLED BILL SIGNED

Mr. KLEIN, from the Committee on Enrolled Bills, reported that that committee had examined and found truly enrolled a bill of the House of the following title, which was thereupon signed by the Speaker:

H. R. 3257. An act to amend Subtitle—Insurance of Title II of the Merchant Marine Act, 1936, as amended, to authorize suspension of the statute of limitations in certain cases, and for other purposes.

#### ADJOURNMENT

Mr. ZIMMERMAN. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 1 o'clock and 26 minutes p. m.), under its previous order, the House adjourned until Monday, April 24, 1944, at 12 o'clock noon.

#### COMMITTEE HEARINGS

##### COMMITTEE ON WORLD WAR VETERANS' LEGISLATION

(Friday, April 21, 1944)

The Committee on World War Veterans' Legislation will meet in executive session on Friday, April 21, 1944, at 10:30 a. m.

##### COMMITTEE ON ROADS

(Monday, April 24, 1944)

The House Committee on Roads will meet at 10 a. m. Monday, April 24, 1944, in room 1011, New House Office Building, to hold hearings on H. R. 4628.

##### COMMITTEE ON ROADS

(Tuesday, April 25, 1944)

The House Committee on Roads will meet at 10 a. m. Tuesday, April 25, 1944, in room 1011, New House Office Building, to hold hearings on H. R. 2426.

#### EXECUTIVE COMMUNICATIONS, ETC.

Under clause 2 of rule XXIV, executive communications were taken from the Speaker's table and referred as follows:

1452. A communication from the President of the United States, transmitting a draft of a proposed provision pertaining to appropriations for the Treasury Department for the fiscal years 1944 and 1945 (H. Doc. No. 539); to the Committee on Appropriations and ordered to be printed.

1453. A communication from the President of the United States, transmitting a draft of a proposed provision pertaining to an existing appropriation for the legislative establishment, Government Printing Office (H. Doc. No. 540); to the Committee on Appropriations and ordered to be printed.



# REPORTS OF COMMITTEES ON PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XIII, reports of committees were delivered to the Clerk for printing and reference to the proper calendar, as follows:

Mr. COCHRAN: Committee on Accounts. House Resolution 512. Resolution providing for the payment of 6 months' salary compensation and \$250 funeral expenses to Mrs. Barbara McDonough, late an employee of the House; without amendment (Rept. No. 1360). Referred to the House Calendar.

Mr. BLAND: Committee on the Merchant Marine and Fisheries. Senate Joint Resolution 112. Resolution authorizing and directing the Fish and Wildlife Service of the Department of the Interior to conduct a survey of the marine and fresh-water fishery resources of the United States, its Territories, and possessions; without amendment (Rept. No. 1362). Referred to the Committee of the Whole House on the state of the Union.

Mr. BLAND: Committee on the Merchant Marine and Fisheries. H. R. 4307. A bill to amend the Canal Zone Code; with amendment (Rept. No. 1363). Referred to the Committee of the Whole House on the state of the Union.

Mr. BULWINKLE: Committee on Interstate and Foreign Commerce. H. R. 4624. A bill to consolidate and revise the laws relating to the Public Health Service, and for other purposes; without amendment (Rept. No. 1364). Referred to the Committee of the Whole House on the state of the Union.

## ADVERSE REPORTS

Under clause 2 of rule XIII,

Mr. BLOOM: Committee on Foreign Affairs. House Concurrent Resolution 77. Concurrent resolution requesting certain information from the President (Rept. No. 1361). Ordered to be printed.

## PUBLIC BILLS AND RESOLUTIONS

Under clause 3 of rule XXII, public bills and resolutions were introduced and severally referred as follows:

By Mr. LANHAM:

H. R. 4641. A bill to amend section 4 of the act entitled "An act to transfer jurisdiction over commercial prints and labels, for the purpose of copyright registration, to the Register of Copyrights," approved July 31, 1939; to the Committee on Patents.

By Mr. MASON:

H. R. 4642. A bill to amend the Nationality Act of 1940; to the Committee on Immigration and Naturalization.

By Mr. NORMAN:

H. R. 4643. A bill to authorize the Secretary of Agriculture to establish and operate forest-products pilot plants in the Northwestern States; to the Committee on Agriculture.

By Mr. VOORHIS of California:

H. R. 4644. A bill to insure the maximum production of oil during the war; to the Committee on Banking and Currency.

By Mr. CRAVENS:

H. R. 4645. A bill for the purpose of conserving the coal resources of the Nation, and for other purposes; to the Committee on Ways and Means.

## MEMORIALS

Under clause 3 of rule XXII, memorials were presented and referred as follows:

By the SPEAKER: Memorial of the House of Representatives of Puerto Rico, memorializing the President and the Congress of the United States to pass House bill 2082; to the Committee on Insular Affairs.

Also, memorial of the Municipal Assembly,

of Lares, P. R., memorializing the President and the Congress of the United States to approve Congressman McGEHEE's resolution requesting the immediate removal from office of Gov. Rexford Guy Tugwell and the appointment of a new Governor; to the Committee on Insular Affairs.

Also, memorial of the Municipal Assembly of Yauco, P. R., memorializing the President and the Congress of the United States to approve Congressman McGEHEE's resolution demanding from the President of the United States the immediate removal of Rexford G. Tugwell from the governorship of Puerto Rico; to the Committee on Insular Affairs.

Also, memorial of the Municipal Assembly of Rio Piedras, P. R., memorializing the President and the Congress of the United States to endorse Congressman McGEHEE's resolution asking the immediate removal of Rexford Guy Tugwell, from the governorship of Puerto Rico and the appointment of a new Governor that may uphold the traditions of American government and guarantee the people of Puerto Rico impartial elections in November of 1944; to the Committee on Insular Affairs.

Also, memorial of the Municipal Assembly of Aguas Buenas, P. R., memorializing the President and the Congress of the United States to endorse Congressman McGEHEE's resolution, requesting the immediate removal of Rexford G. Tugwell from the governorship of Puerto Rico and the appointment of a new Governor, and for other purposes; to the Committee on Insular Affairs.

Also, memorial of the Municipal Assembly of Adjuntas, P. R., memorializing the President and the Congress of the United States to approve Congressman McGEHEE's resolution demanding the immediate removal of Rexford Guy Tugwell as Governor of Puerto Rico, as well as the appointment of a new Governor, and for other purposes; to the Committee on Insular Affairs.

Also, memorial of the Municipal Assembly of Canovanas, P. R., memorializing the President and the Congress of the United States to support the resolution of Congressman McGEHEE to demand the immediate removal of Rexford Guy Tugwell as Governor of Puerto Rico, and for other purposes; to the Committee on Insular Affairs.

Also, memorial of the Municipal Assembly of Corozal, P. R., memorializing the President and the Congress of the United States to endorse Congressman McGEHEE's resolution requesting the immediate removal from office of Gov. Rexford G. Tugwell; to the Committee on Insular Affairs.

Also, memorial of the Municipal Assembly of Juncos, P. R., memorializing the President and the Congress of the United States to support the resolution of Congressman McGEHEE to demand the immediate removal of Rexford Guy Tugwell as Governor of Puerto Rico, and for other purposes; to the Committee on Insular Affairs.

Also, memorial of the Municipal Assembly of Manati, P. R., memorializing the President and the Congress of the United States to support Congressman McGEHEE's resolution demanding the removal of Rexford G. Tugwell as Governor of Puerto Rico, and for other purposes; to the Committee on Insular Affairs.

Also, memorial of the Municipal Assembly of Isabela, P. R., memorializing the President and the Congress of the United States to endorse Congressman McGEHEE's resolution requesting the immediate removal from office of Gov. Rexford Guy Tugwell; to the Committee on Insular Affairs.

## PETITIONS, ETC.

Under clause 1 of rule XXII, petitions and papers were laid on the Clerk's desk and referred as follows:

5517. By Mr. BRYSON: Petition of Pearl Kinney and 1,200 other citizens of Saginaw,

Mich., urging enactment of House bill 2082, a measure to reduce absenteeism, conserve manpower, and speed production of materials necessary for the winning of the war by prohibiting the manufacture, sale, or transportation of alcoholic liquors in the United States for the duration of the war; to the Committee on the Judiciary.

5518. Also, petition of Cora Armstrong and 76 other citizens of Conoquenessing, Pa., urging enactment of House bill 2082, a measure to reduce absenteeism, conserve manpower, and speed production of materials necessary for the winning of the war by prohibiting the manufacture, sale, or transportation of alcoholic liquors in the United States for the duration of the war; to the Committee on the Judiciary.

5519. Also, petition of George C. Patteron and 61 other citizens of Salem, Oreg., urging enactment of House bill 2082, a measure to reduce absenteeism, conserve manpower, and speed production of materials necessary for the winning of the war by prohibiting the manufacture, sale, or transportation of alcoholic liquors in the United States for the duration of the war; to the Committee on the Judiciary.

5520. Also, petition of Raymond Jackson and 51 other citizens of Clay City, Ind., urging enactment of House bill 2082, a measure to reduce absenteeism, conserve manpower, and speed production of materials necessary for the winning of the war by prohibiting the manufacture, sale, or transportation of alcoholic liquors in the United States for the duration of the war; to the Committee on the Judiciary.

5521. Also, petition of Rev. L. G. Leech and 32 other citizens of Clay City, Ind., urging enactment of House bill 2082, a measure to reduce absenteeism, conserve manpower, and speed production of materials necessary for the winning of the war by prohibiting the manufacture, sale, or transportation of alcoholic liquors in the United States for the duration of the war; to the Committee on the Judiciary.

5522. Also, petition of Mrs. J. H. Schlappach and 56 other citizens of Blackwell, Okla., urging enactment of House bill 2082, a measure to reduce absenteeism, conserve manpower, and speed production of materials necessary for the winning of the war by prohibiting the manufacture, sale, or transportation of alcoholic liquors in the United States for the duration of the war; to the Committee on the Judiciary.

5523. Also, petition of Ethel Rogier and 69 other citizens of Patoka, Ill., urging enactment of House bill 2082, a measure to reduce absenteeism, conserve manpower, and speed production of materials necessary for the winning of the war by prohibiting the manufacture, sale, or transportation of alcoholic liquors in the United States for the duration of the war; to the Committee on the Judiciary.

5524. Also, petition of Mrs. W. W. Weaver and 80 other citizens of Greensboro, Md., urging enactment of House bill 2082, a measure to reduce absenteeism, conserve manpower, and speed production of materials necessary for the winning of the war by prohibiting the manufacture, sale, or transportation of alcoholic liquors in the United States for the duration of the war; to the Committee on the Judiciary.

5525. Also, petition of H. N. Gerry and 137 other citizens of Baltimore, Md., urging enactment of House bill 2082, a measure to reduce absenteeism, conserve manpower, and speed production of materials necessary for the winning of the war by prohibiting the manufacture, sale, or transportation of alcoholic liquors in the United States for the duration of the war; to the Committee on the Judiciary.

5526. Also, petition of J. R. Holland and 142 other citizens of Hillsboro, Md., urging enactment of House bill 2082, a measure to

## CONSOLIDATION AND REVISION OF LAWS RELATING TO THE PUBLIC HEALTH SERVICE

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APRIL 20, 1944.—Ordered to be printed

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Mr. BULWINKLE, from the Committee on Interstate and Foreign Commerce, submitted the following

### R E P O R T

[To accompany H. R. 4624]

The Committee on Interstate and Foreign Commerce, to whom was referred the bill (H. R. 4624) to consolidate and revise the laws relating to the Public Health Service, and for other purposes, having considered the same, report favorably thereon without amendment and recommend that the bill do pass.

#### GENERAL STATEMENT

The bill for the most part is merely a restatement of the laws relating to the Public Health Service.

It proposes to bring together, in a compact and orderly arrangement, substantially all existing law on the subject except obsolete provisions; to repeal obsolete laws; to resolve certain ambiguities in existing law; and to make a number of revisions which operating experience has shown to be necessary or desirable.

At the present time the laws applicable to the Public Health Service are the result of the accumulation, over a century and a half, of a great number of separate enactments. Since 1878, when the codification accomplished by the Revised Statutes was completed, there have been many further enactments, often consisting of isolated provisions in appropriation acts, bearing on the functions of the Public Health Service. Passed at different times, these provisions of law have generally neither expressly repealed nor expressly amended their predecessors, but have simply superimposed new duties and authorities on those already existing. Couched in different terms, frequently providing different procedures, they have led to serious inconsistencies and ambiguities, as well as to gaps and duplications in substantive authority, to such an extent as to impede the efficient discharge by



the Service of its responsibilities. The number and volume of these enactments is indicated by the fact that the repealing section occupies over 14 pages of the present bill.

At the time of its consideration last year of the bill which became the Public Health Service Act of 1943 (Public Law 184, 78th Cong.), the committee recognized the unsatisfactory state of the law regarding the Public Health Service. The need for prompt action on that measure, in order to enable the Service better to meet its wartime responsibilities, precluded any substantial revision of existing law in connection with that bill. At the instance of the committee, however, work was begun upon a comprehensive bill which would substitute for the existing mass of uncorrelated legislation a compact and logically arranged law governing the Public Health Service. In October 1943, H. R. 3379 was introduced to accomplish this purpose. Hearings on that bill were commenced on March 1 and concluded on March 14, 1944. As a result of further study since the introduction of the bill, of suggestions made at the hearing, and especially of the enactment in November of the Public Health Service Act of 1943, many changes in the bill were found to be necessary. The present bill, H. R. 4624, incorporates these changes.

Enactment of the bill is recommended by the Federal Security Agency and by the president of the Association of State and Territorial Health Officers. No witness at the hearing opposed it, or urged more than minor amendments.

The bill consists of six titles. The first contains the short title and definitions, and the second deals with the organization, administration, and personnel of the Public Health Service. The third title contains the basic operating authority of the Service, and is subdivided into seven parts, dealing, respectively, with research and investigations, Federal-State cooperation, hospitals and medical examinations and medical care, lepers, narcotic addicts, biological products, and quarantine and inspection. The fourth title continues the existence and functions of the National Cancer Institute. Title V contains miscellaneous provisions of a permanent nature, while title VI, which would not be a part of the Public Health Service Act, contains certain temporary provisions and amendments of certain other statutes, as well as the repeal of the existing provisions of law relating to the Public Health Service.

Large portions of the bill consist merely of reenactment of existing legislation with minor textual changes proposed in the interest of clarity and consistency. In some fields, however, the inadequacies of present law have necessitated a complete rewriting. In the process of clarification some doubtful authorities would be confirmed, and in a few instances, where administrative experience has shown the need for it, wholly new authority would be conferred.

The bill does not include the subject matter of the so-called Nurse Training Act (Public Law 74, 78th Cong., as amended), because that act will by its own terms expire with the termination of hostilities in the present war. As it is a separate and self-contained enactment there is no need to incorporate it in even the temporary provisions of the bill.

## PRINCIPAL ADDITIONS TO AND CHANGES IN EXISTING LAW

The section by section explanation of the bill which is appended indicates the additions to and changes in substantive law which would be effected by the bill. The most important are these:

The President would be authorized to create special temporary positions in the Public Health Service for important work in time of war or emergency (sec. 207 (a)). The classes of persons eligible for appointment to the regular corps of the Service would be enlarged to include scientists in such fields as biology and zoology (sec. 208 (a)). The authority to employ special consultants, now conferred by the National Cancer Institute Act, would be broadened to apply to all branches of the work of the Service (sec. 208 (c)). Provision is included for allowances to female commissioned officers on account of their actual dependents (sec. 209 (d)). The provisions governing retirement of commissioned officers, now contained in regulations, would be written into law, but without any major changes (sec. 211). The regulatory authority would be divided, more clearly and logically than at present, between the President, on the one hand, and the Surgeon General and the Federal Security Administrator, on the other (sec. 215).

The authority to make grants, in aid of research work, to public or private institutions, now contained in the National Cancer Institute Act, would be expanded to include all fields of research related to the public health (sec. 301 (d)). Appropriations for grants to the States for general public health work would be authorized in the sum of \$20,000,000 annually, of which up to \$2,000,000 would be available, in the discretion of the Surgeon General, for direct Federal expenditure for purposes related to such grants (sec. 314 (b)). The present limitation is \$11,000,000 for such grants, with an additional authorization for the Federal expenditures. From the grants to the States, both for general health work and for venereal-disease control, the bill would permit allotments and payments to be made from time to time (sec. 314 (c) and (d)). At present allotments are made at the beginning of the fiscal year, and payments are made quarterly. Provisions relating to State matching of funds granted and to withdrawal of funds if they have been misapplied by a State, now contained in regulations issued with the approval of the State health authorities, would be incorporated in law (sec. 314 (f) and (g)).

Groups entitled to medical care and hospitalization by the Service would include enrollees of the United States Maritime Service and members of the Merchant Marine Cadet Corps (sec. 322 (a) (6)). At present these persons are cared for by the Service, through an arrangement under the Economy Act. In cases of emergency, treatment at Service hospitals of persons not otherwise eligible would be authorized (sec. 322 (d)). Federal prisoners who are narcotic addicts would be entitled to commutation of sentence for work in prison industries, as are other Federal prisoners, but could not be released under this provision before they are cured (sec. 343 (b)).

Destruction of infected animals or contaminated articles would be permitted as a part of interstate or foreign quarantine procedures,

where such animals or articles are likely to infect human beings with a dangerous disease and no disposition other than destruction can safely be made (sec. 361 (a)). Persons subject to quarantine detention upon entering the country might be released on condition of reporting subsequently to health authorities (sec. 361 (b) and (c)). Under regulations recommended by the National Advisory Health Council, individuals reasonably believed to be infected with certain diseases and to be likely to infect others, might be isolated and examined (secs. 361 (d) and 363). This authority would be limited to the prevention of interstate spread of disease, and the protection in time of war of the military forces and war workers. Persons so isolated would be entitled to treatment by the Service (sec. 322 (e)). Quarantine laws and regulations could, by regulation, be made applicable to civil air navigation and civil aircraft (sec. 367). The penalties for violation of quarantine laws and regulations would be made uniform (sec. 368).

Money collected from some classes of pay patients is now covered into the Treasury as miscellaneous receipts and that collected from others is credited to the applicable appropriation. Under the bill such collections would in all cases be credited to the applicable appropriation (sec. 503). A penalty would be provided for unauthorized wearing of the Public Health Service uniform (sec. 510).

## EXPLANATION OF THE BILL BY TITLES AND SECTIONS

### TITLE I—SHORT TITLE AND DEFINITIONS

#### SECTION 1

This section provides that titles I to V, inclusive, of the bill may be cited as the "Public Health Service Act."

#### SECTION 2

Subsections (a) to (e), inclusive, define the terms "Service," "Surgeon General," "Administrator," "regulations," and "executive department." These definitions are self-explanatory, and are inserted merely for convenience of reference.

Subsection (f) defines the term "State" to mean a State or the District of Columbia, Hawaii, Alaska, Puerto Rico, or the Virgin Islands, except that as used in section 361 (d) (dealing with certain interstate quarantine measures) the term means a State, the District of Columbia, or Alaska. Subsection (g) defines the term "possession" to include among other possessions Puerto Rico and the Virgin Islands. While these two definitions overlap, their use saves considerable verbiage in later sections of the bill. One change resulting from the definition of "State" is pointed out in connection with section 314 (b).

Subsection (h) defines the term "seamen" in language identical with that in 24 U. S. C. 1 except for the addition of the word "primarily." This change confirms the administrative interpretation of existing law.

Subsection (i) defines the term "vessel" in language identical with that found in 29 U. S. C. 87a, except for the addition of the word "artificial" and of the phrase "exclusive of aircraft and amphibious contrivances." No substantive change in existing law is involved.



Subsections (j) and (k) contain the definitions of the words "habit-forming narcotic drug" or "narcotic," and "addict," with no significant change from 21 U. S. C. 221 (a) and 221 (b).

## TITLE II—ADMINISTRATION

### SECTION 201

Section 201 provides that the Public Health Service in the Federal Security Agency shall be administered by the Surgeon General under the supervision and direction of the Administrator. This is a composite of the provisions in 42 U. S. C. 2 and 11.

Present laws applicable to the Public Health Service place some functions in the President, some in the Federal Security Administrator, some in the Surgeon General, and some in the Service or a particular establishment of the Service. The division of responsibility does not follow any consistent pattern, and in some respects is far from clear.

Under the bill all authority and responsibility, except as otherwise stated, would be vested in the Surgeon General, to be exercised under the supervision and direction of the Federal Security Administrator; thus permitting the Administrator to determine what matters, in addition to those specified in the bill, should receive his personal attention.

### SECTION 202

This section states that the Service shall consist of four main parts; namely, (1) the Office of the Surgeon General, (2) the National Institute of Health, (3) the Bureau of Medical Services, and (4) the Bureau of State Services. The Surgeon General is authorized to assign to these organizations the various functions of the Service and to establish within them such divisions and smaller units as he may find necessary and to abolish, transfer, or consolidate these divisions and units. No division, however, shall be established, abolished, or transferred and no divisions shall be consolidated, except with the approval of the Administrator. The National Institute of Health is to be administered as part of the field service. The Surgeon General may delegate any of his responsibilities except the making of regulations.

The provisions of this section are substantially the same as those in Public Law 184, Seventy-eighth Congress, section 1, except for the addition of the provision authorizing delegation. The authority to delegate would, like other authority in the bill, be exercised under the supervision and direction of the Administrator.

The statutory requirement contained in Public Law 184 that there be maintained a dental division and a sanitary engineering division has been omitted, as imposing an unduly rigid administrative structure; though the positions of chief dental officer and chief sanitary engineering officer would be continued by section 205 (b).

### SECTION 203

This section would continue the existence of a commissioned regular corps and, for the purpose of securing a reserve for duty in times of national emergency, a commissioned reserve corps. All commissioned officers must be citizens, and they are compensated as provided



in the Joint Service Pay Acts. Commissioned officers in the reserve corps are appointed by the President, and in the regular corps by the President with the consent of the Senate. Active service in the, reserve corps, as well as service in the regular corps, is to be credited for the purpose of promotion in the regular corps.

The provisions of this section are derived from 42 U. S. C. 12, 18, 18a, and 38.

#### SECTION 204

Section 204 provides for the appointment of the Surgeon General from the regular corps for a 4-year term, by the President with the consent of the Senate. If he is not reappointed upon the expiration of his term, he reverts to the grade and number in the regular corps which he would otherwise have occupied. This section continues the provisions of 42 U. S. C. 10 and 11a. Changes in present law are the addition of the requirement of selection from the regular corps and the fixing of a 4-year term; both of these additions being drawn from present regulations.

#### SECTION 205

Subsection (a) provides for the designation by the Surgeon General of a commissioned officer from the regular corps who shall be known as the Deputy Surgeon General and whose responsibilities include administering the Office of the Surgeon General and acting as Surgeon General in the latter's absence or disability or in the event of a vacancy in the office. The provisions of this subsection are drawn from 42 U. S. C. 11b, with a change in designation from "Assistant to the Surgeon General" to "Deputy Surgeon General."

Subsection (b) provides for the assignment by the Surgeon General of six commissioned officers from the regular corps to be, respectively, Director of the National Institute of Health, Chief of the Bureau of State Services, Chief of the Bureau of Medical Services, chief medical officer of the United States Coast Guard, chief dental officer, and chief sanitary engineering officer. These officers are to have the title of Assistant Surgeon General. This subsection is taken from sections 2 and 3 of Public Law 184, omitting, for the reasons indicated above, the provision for a dental division and a sanitary engineering division.

Subsection (c) requires the Surgeon General to designate the Assistant Surgeon General who shall serve in his place in the case of absence or disability or vacancies in the office of both Surgeon General and Deputy Surgeon General. This subsection is taken from section 6 of Public Law 184.

#### SECTION 206

Section 206 (a) provides that the grade, pay, and allowances of the Surgeon General shall be the same as those of the Surgeon General of the Army. The grade, pay, and allowances of the Deputy Surgeon General and Assistant Surgeons General while assigned to act in those capacities shall correspond to those of brigadier general. The grades of other commissioned officers of the Public Health Service and their correspondence with the grades of officers of the Army are set forth. These provisions are taken from 42 U. S. C. 11a and 11b and from Public Law 184. The grade of "passed assistant" is changed to "senior assistant," a change which is made throughout the bill.

Subsection (b) sets forth the titles of the medical officers of the grades listed in the preceding subsection. The President is authorized to prescribe titles for commissioned officers other than medical officers. Titles of the officers of the reserve corps shall have the suffix "Reserve." This subsection is a composite drawn from 42 U. S. C. 18, 34, 35, and 36. The only change in present law is the provision for the suffix "Reserve."

#### SECTION 207

Section 207 (a) provides that when necessary for the accomplishment of important temporary work in time of war or proclaimed emergency, the President may establish special temporary positions and prescribe the applicable grades. Only three of these positions may have the grade of Assistant Surgeon General at any one time. Commissioned officers are to be assigned to these positions by the Surgeon General.

This section constitutes new matter. It is designed to enable the Service to adapt its administrative structure to temporary needs in time of war, epidemic, flood, or other catastrophe, when special demands upon the Service may require the temporary establishment of supervisory posts not needed in normal times.

Subsection (b) authorizes the assignment by the Surgeon General of commissioned officers and technical or professional noncommissioned personnel as chiefs of administrative units. The assignment shall not affect the pay of a commissioned officer except that while he is below the grade of director and acts as chief of a division he shall have the temporary grade and pay applicable to the director grade.

This section is drawn from 42 U. S. C. 22 and section 3 of Public Law 184, Seventy-eighth Congress. The provision is slightly broader than existing law, omitting the restriction that noncommissioned personnel may be utilized only if no commissioned personnel are available. The limitation in Public Law 184 that no more than six officers below the grade of medical director shall serve as division chiefs is omitted in order not to limit the use in such positions of younger men of proved ability.

#### SECTION 208

Subsection (a) (1) limits original appointments in the regular corps to the senior assistant and lower grades and requires an examination for grades above junior assistant. The examination is to be given, in accordance with regulations of the President, in medicine, surgery, dentistry, hygiene, sanitary engineering, pharmacy, or related scientific specialties in the field of public health.

This paragraph is a composite of 42 U. S. C. 12, 13, and 38, and of section 7 of Public Law 184. A change is the extension of eligibility for the regular corps to persons qualified in "related scientific specialties in the field of public health." This provision would enlarge only slightly the present eligibility, and is intended to cover persons such as biologists, zoologists, entomologists, and other scientists whose training and qualifications are comparable to those of doctors of medicine.

Paragraph (2) authorizes original appointments in the Reserve Corps in any grade up to and including that of director, after the

passage of an examination given in accordance with regulations of the President. Commissions are to be for a period of not more than 5 years and may be terminated by the President at any time. This paragraph is drawn from 42 U. S. C. 18 and section 7, Public Law 184. The provision denying members of the Reserve Corps exemption from military or naval service is omitted, inasmuch as, according to existing interpretation, it has been superseded by the Selective Training and Service Act.

Subsection (b) authorizes the appointment by the President, with the advice and consent of the Senate, of not over three persons in any one fiscal year to grades in the regular corps above senior assistant, up to and including the director grade, whenever there are not commissioned officers available for the performance of permanent duties requiring highly specialized training and experience in special fields related to public health. Persons so appointed shall be considered for the purposes of pay and pay period to have had service at the date of appointment equal to that of the junior officer of that grade. This paragraph is derived from 42 U. S. C. 41, with the substitution of the phrase "in special fields related to public health" for the phrase "in scientific research."

Subsection (c) authorizes the employment of special consultants, without regard to the civil service or classification laws. This is a broadening of a similar provision in 42 U. S. C. 137d (d) which relates only to the National Cancer Institute. The exemption from the civil service and classification laws merely confirms the present situation.

Subsection (d) authorizes the Surgeon General to appoint fellows without regard to the civil service or classification laws. This paragraph is drawn from 42 U. S. C. 23 and 137d (c) which apply to fellowships in the National Institute of Health and in the National Cancer Institute, respectively. The exemption from civil service and classification laws is, again, a confirmation of the existing situation.

Subsection (e) authorizes the appointment of aliens as consultants and fellows and exempts them, unless specifically otherwise provided, from any prohibition in any other act against the employment or compensation of aliens. Existing law applicable to the National Cancer Institute expressly authorizes the appointment of fellows and consultants "from abroad," but general restrictions in appropriations acts have prevented utilization of the authority.

Subsection (f) specifies that the appointing power, with respect to civil-service personnel of the Service, shall be in the Federal Security Administrator. Appointments may be made effective as of the date upon which the person enters upon duty. This subsection is drawn from 42 U. S. C. 40 without change of substance.

#### SECTION 209

Subsection (a) provides that commissioned officers of the regular corps shall receive the pay and allowances provided by law. Pay and allowances under the present law are governed by the Joint Service Pay Acts, and are not set forth again in this bill.

Subsection (b) provides that the pay and allowances for reserve officers on active duty are to be the same as those for officers of the regular corps. This provision involves no change from existing law in 42 U. S. C. 18 and 37 U. S. C. 114.



Subsection (c) would, in accordance with regulations of the President, authorize commissioned officers in the regular corps, and those in the reserve corps when on active duty, to make allotments from their pay, and to receive leaves of absence without deduction from their pay. They would also be permitted to purchase quartermaster supplies from the Army, Navy, and Marine Corps at the price charged to the officers of those services. This subsection is a composite of provisions in 42 U. S. C. 19, 31, and 32.

Subsection (d) provides that female commissioned officers shall receive the same pay and allowances as male officers, except that allowances for dependents shall be granted only in cases of actual dependency. The provisions of this paragraph are new.

Under subsection (e), compensation for members of the National Advisory Health Council and National Advisory Cancer Council, other than ex officio members, would be fixed at a rate to be established by the Administrator, not exceeding \$25 per diem, together with travel and subsistence expenses. This subsection is drawn from provisions in 42 U. S. C. 21a and 137b.

Subsection (f) provides for the compensation on a contract basis of field employees of the Service rendering part-time duty and subject to call for additional services. The provision, which relates primarily to contract doctors, is taken from 42 U. S. C. 67 with no change except that the fees for additional services are to be fixed by the Surgeon General instead of by the Federal Security Administrator.

Subsection (g) authorizes the payment, in accordance with regulations of the President, of increased pay and allowances for any officer or employee of the Service assigned to duty which requires intimate contact with persons afflicted with leprosy. It constitutes an extension of 42 U. S. C. 125, to cover subordinate noncommissioned personnel as well as commissioned and noncommissioned officers. Instead of the present automatic increase of 50 percent, however, the bill would provide that an increase may be allowed, not to exceed 50 percent.

Subsection (h) authorizes the payment of stipends or allowances, including travel and subsistence expenses, to individuals receiving fellowships. This subsection is derived from 42 U. S. C. 137d (c), applicable to the National Cancer Institute.

#### SECTION 210

This section relates to the promotion and separation of commissioned officers in the regular corps.

The introductory language of subsection (a), specifying the manner in which promotions are to be made, is taken without material change from 42 U. S. C. 37.

The exception in paragraph (1), relating to temporary promotions in time of war or national emergency, is taken from section 4 of Public Law 184, Seventy-eighth Congress, with the omission of the provision, which has already been executed, that an officer promoted after December 7, 1941, shall be deemed to have accepted his promotion upon the date of approval.

The second exception, relating to officers whose initial appointment to the regular corps was above the assistant grade, is taken from 42 U. S. C. 37 (a).

Paragraph (3) requires officers commissioned in the grade of junior assistant to be examined for promotion after not more than 2 years



of service and, if qualified, promoted to the next higher grade. This provision is taken from section 7 of Public Law 184, Seventy-eighth Congress, without change, except that the former law required the examination to be made not less than 1 year nor more than 2 years after appointment.

The fourth exception authorizes the promotion of commissioned officers other than medical, dental, and sanitary engineering officers in accordance with regulations of the President. It is a modification of the provision in 42 U. S. C. 37 (b), restricting promotion of pharmacists, and is broadened to include the specialists made eligible by section 208 (a) (1).

Subsection (b) provides for the review, at the end of the first 3 years in service, of the record of each commissioned officer originally appointed in or above the grade of senior assistant, and separation from the service with 6 months' pay and allowances of those not found fully qualified for further service. The provision is the same as that in section 5 of Public Law 184.

Subsection (c) provides for the separation of commissioned officers in the regular corps who are found to be not qualified for promotion for reasons other than physical disability incurred in line of duty. The provisions are taken without any substantial change from 42 U. S. C. 37 (c).

#### SECTION 211

Section 211 deals with retirement of regular and reserve commissioned officers for disability and age. Other sections also deal with some aspects of this subject. Thus section 210 (c) (2) deals with retirement of certain commissioned officers who fail of promotion; section 605 gives commissioned officers the benefits of United States employees' compensation; and section 606 deals with the inclusion of civilian service in computing the amount of retired pay for certain commissioned officers.

Under existing regulations, based on section 1 of the act of July 1, 1902, as amended (42 U. S. C. 1), officers of the regular corps disabled in line of duty are placed on "waiting orders" at 75 percent of their active pay, which means base pay plus the longevity increase, at the time they were placed on such orders. The Public Health Service Act of 1943 (Public Law 184, 78th Cong.), gives these same rights to reserve officers disabled in time of war. Subsection (a) of section 211 continues this and changes "waiting orders" to retirement.

Subsection (b) also contains provisions found in existing regulations. It provides for compulsory retirement of all commissioned officers at age 64, with retired pay for officers of the regular corps at the rate of 75 percent of their active pay at the time of retirement, subject, however, to the provisions of subsection (c). The Army does not automatically retire officers at age 64 in time of war, and a somewhat similar exception to the compulsory retirement is contained in subsection (e).

Paragraph (1) of subsection (c) incorporates the provisions of existing regulations relating to retired pay of officers over 45 years of age at the time of original appointment, but as modified by Public Law 184 to give commissioned officers disabled in time of war retired pay at the 75-percent rate regardless of age at the time of original appointment. In other cases, such officers will continue to receive

retired pay at the rate of only 4 percent of their active pay at the time of retirement for each 12 months of active service. Paragraph (2) bases retired pay of an officer who has served 4 years or more as Surgeon General or Deputy Surgeon General, and has then reverted to a lower rank in the Service, on the pay of the highest grade held by him while he was so serving. This is a change of law to accord with Army practice. Paragraph (3) follows the existing regulations, basing retired pay of those who fail of promotion because of disability incurred in line of duty on the pay of the grade to which they would have been promoted.

Subsection (d) follows present regulations by permitting recall of officers retired for disability when they have recovered. It adds to existing law by permitting the recall to active duty in time of war of officers retired for age. Your committee was of the opinion that in time of war there should be authority to utilize the training and skill of officers who have been retired but who are still capable of useful service.

Subsection (e) is new. It permits a commissioned officer with 25 or more years of active service, during at least 4 of which he served as Surgeon General, to retire, if the President approves, before reaching age 64, with retired pay at the rate of 75 percent of the pay of the highest grade held by him as Surgeon General. Your committee is of the opinion that this addition is desirable because in some cases an officer who has been Chief of the Service may not readily fit into the organization in a lower rank.

Subsection (f) follows a recent interpretation of existing law to the effect that Reserve officers on active duty are subject to the Civil Service Retirement Act.

#### SECTION 212

Section 212 deals with military benefits and is substantially the same as section 8 of Public Law 184, Seventy-eighth Congress.

Paragraph (1) of subsection (a) of section 212 defines the term "full military benefits" to include most of the rights, privileges, immunities, and benefits provided under law for commissioned officers of the Army and their surviving beneficiaries. Among these rights, privileges, immunities, and benefits are the following: Exemption of pay up to \$1,500 from income tax and other exemptions under the Internal Revenue Code (26 U. S. C. 22 (b) (13), 421, 621; 50 U. S. C. (App.) 1013); the privilege of free mail (50 U. S. C. (App.) 639); reemployment rights (*id.*, 357) for Reserve officers called to active duty since November 11, 1943, the date of the enactment of Public Law 184; payment of accrued annual leave (5 U. S. C. 61a) to any officers who have entered the service from civil-service positions since that date; replacement of property lost by military action or certain other hazards (31 U. S. C. 218); continuation of the pay and allowances of officers who are missing in action, and authority to make a finding of death of officers who have been missing for more than 12 months (50 U. S. C. (App.) 1001 et seq.); authority to use a simplified form of affidavit in connection with increased allowances on account of dependents (50 U. S. C. (App.) 836); exemption from the necessity of making the affidavit required of civil officers upon appointment, which is a prerequisite to receiving pay, and which is difficult for Public Health Service officers serving overseas to execute in case they

receive a temporary promotion (see 5 U. S. C. 21a, 21b); in the case of death occurring while in service, 6 months' pay (10 U. S. C. 903), the cost of burial (10 U. S. C. 916a-916d), right to burial in a national cemetery (24 U. S. C. 281), and right to a headstone at the expense of the Government when buried in a national cemetery (id., 279); rights provided under the Soldiers' and Sailors' Civil Relief Act, as amended, and under the National Service Life Insurance Act, as amended; travel allowances on either a mileage or a per diem basis, as prescribed by the Surgeon General, without regard to repeated travel between two or more places in the same vicinity (37 U. S. C. 112a); and the various veterans' benefits. Among the veterans' benefits included are the right to a burial allowance, a flag for the grave, and burial in a national cemetery and a headstone therein at Government expense, regardless of when the death occurred; the benefits of the Veterans' Employment Service; and benefits relating to compensation, pensions, hospitalization, domiciliary care, out-patient treatment, vocational rehabilitation, and preferences for civil-service purposes.

This paragraph differs from section 8 (a) (1) of Public Law 184 in only a few respects. Since the benefits accorded Army and Navy officers are in a few instances not identical your committee thought it desirable, in order to avoid confusion, to restrict benefits to those enjoyed by commissioned officers of the Army. Retirement and allowances for uniforms, which were included in Public Law 184, were not included as benefits in this section since they are provided for specifically in sections 211, 213, and 607 of the bill. Exemption from payment of postage on mail was specifically included as a benefit in order to avoid possible doubts. The right to wear military ribbons and decorations is dealt with separately, and is therefore excluded from full military benefits. Rights under the Mustering-out Pay Act of 1944 have been excluded specifically because that act was enacted after Public Law 184 and inclusion of these benefits would, consequently, be an extension of existing law. Reemployment rights for officers of the regular corps are excluded since such officers will normally continue in the Public Health Service after the war. Reemployment rights are also denied reserve officers called to active duty prior to the enactment of Public Law 184 because, since they had no such rights prior to that date, injustice might otherwise be done to individuals appointed to their positions prior to such enactment.

Paragraph (2) of this subsection, defining "limited military benefits" as full military benefits except veterans' benefits and national service life insurance, is the same as section 8 (a) (2) of Public Law 184.

Subsection (b) combines, without any change in substance, subsection (b) and part of subsection (c) of section 8 of Public Law 184. Under it all commissioned officers on active duty in time of war are entitled to limited military benefits, while those detailed to the Army, Navy, or Coast Guard in time of war or peace, those serving outside the United States, or in Alaska, in time of war, and those serving while the Service is part of the military forces under Executive order in time of war, are entitled to full military benefits.

Subsection (c), vesting in the Surgeon General administrative functions in connection with the granting of these military benefits (except veterans' benefits) for officers of the Service, is intended merely



to prevent confusion as to who would exercise such functions. Thus, the Surgeon General would, among other things, examine into, ascertain, and determine the value of lost or destroyed property for which officers of the Service claim reimbursement under the act of March 3, 1885, as amended (31 U. S. C. 218-222b); would prescribe per diem rates for such officers under section 1 of the act of June 2, 1942, as amended (37 U. S. C. 112a); would exercise the authority conferred on the Secretary of War under the act of October 26, 1942 (50 U. S. C. (App.) 836) relating to acceptance of certificates of officers in regard to pay and allowances; and would exercise the authority vested in the Secretary of War, the War Department, and other officers thereof, under the Soldiers' and Sailors' Civil Relief Act, as amended (50 U. S. C. (App.) 501-590). In all these respects, of course, the Surgeon General would act under the direction and supervision of the Federal Security Administrator.

Uncertainties have arisen concerning the rights of commissioned officers of the Service, either detailed to the armed forces or serving in war theaters without such detail, to be awarded the various military ribbons, decorations, and medals. Subsection (d) would authorize the President to prescribe rules on this subject.

#### SECTION 213

Section 213 deals with allowances for uniforms and constitutes merely a clarification of Public Law 184, Seventy-eighth Congress, as to officers who are hereafter appointed or called to active duty in time of war, or who are on active duty at the time of commencement of a future war. Under it such officers, if in the grade of junior assistant, assistant, or senior assistant receiving pay of the first, second, or third pay period, would receive \$250 for uniforms if they had not previously received such an allowance from the Service. Allowances for those appointed or called in the past, but after December 7, 1941, are provided in section 607.

#### SECTION 214

Subsection (a) of section 214, which authorizes details of officers or employees to Federal agencies and prescribes the procedure for paying salaries and allowances of personnel detailed, modifies existing law (42 U. S. C. 17a) only slightly. In order to remove any doubt of the propriety of such details, particularly to the Army, Navy, and Coast Guard, for the purpose of rendering medical services to personnel, the present statutory limitation of details to only those agencies which are carrying on a public-health activity is omitted. The subsection also allows more flexibility in financial arrangements regarding such details than is now permitted under the statute cited above, and in this respect is drawn from the Economy Act (31 U. S. C. 686) with regard to interdepartmental details of personnel. Officers detailed to the armed forces would be subject to the laws governing the service to which detailed. Present law (42 U. S. C. 20) so provides, but only in time of war.

Subsection (b) relates to the detail of personnel to States and is substantially the same as 42 U. S. C. 803. It modifies existing law only to the extent of using slightly broader language in describing the purposes for which such details may be made and making it clear



that details requested by State health authorities may be made to local units as well as to the States.

Subsection (c), relating to the detail of personnel to institutions, is substantially the same as existing law (42 U. S. C. 17b). The only modifications are an expansion to permit details not only to educational and research institutions, but also to other institutions engaged in health activities, and a restriction to permit details to only such institutions as are nonprofit. The latter is intended to exclude the possibility of details of Federal personnel to commercial concerns, even though they be engaged in research pertaining to public health.

Subsection (d) is new matter, though confirmatory of interpretation of existing law, insofar as it permits personnel detailed under subsection (b) or (c) to be placed on leave without pay and to be paid by the State or institution to which they are detailed, without losing any of the rights, such as retirement, longevity pay, and other benefits, to which they would be entitled as Public Health Service personnel.

#### SECTION 215

Section 215 deals with the subject of regulations. Subsection (a) specifies the subjects on which regulations are to be made by the President. These include appointment, promotion, retirement, termination of commission, titles, pay, uniforms, allowances (including increased allowances for foreign service), and discipline of the commissioned corps of the Service. Subsection (b) gives authority to the Surgeon General, with the approval of the Federal Security Administrator, to make regulations on all other matters, including regulations with respect to travel, transportation of household goods and effects, allotments from their pay by commissioned officers, uniforms for employees, and the custody, use, and preservation of the records, papers, and property of the Service. Subsection (c) continues a prohibition in existing law (42 U. S. C. 40) against giving preference to any school of medicine in regulations regarding qualifications for appointment of medical officers or employees.

There is some uncertainty as to the meaning of existing law on this subject. The President was given authority in 42 U. S. C. 3 to prescribe rules for the conduct of the Service and regulations regarding its internal administration and discipline and the uniforms of its officers and employees. However, other statutes, some antedating 42 U. S. C. 3 and some more recent, have given the Secretary of the Treasury authority (later transferred to the Federal Security Administrator) to prescribe regulations on specific subjects. Thus, there seems to be no consistent scheme in present law for the distribution of the rule-making authority and, consequently, it is often difficult to determine what procedure is to be followed in prescribing regulations on a particular subject.

The line of demarcation proposed in this section of the bill, as to which regulations are to be made by the President and which are to be made by the Surgeon General, with the approval of the Administrator, comes fairly close to what is believed to be existing law.

## SECTION 216

Section 216 deals with use of the Service in time of war or emergency and is derived from 40 U. S. C. 8 and section 8 (c) of Public Law 184. The first part of the proposed section would permit the President to use the Service, in time of war or in time of emergency proclaimed by him, "in such manner as shall in his judgment promote the national interest." Present law authorizing such use in time of "threatened or actual war," is unsatisfactory, both because of reluctance to declare that war is "threatened," and because the provision does not embrace some emergencies such as an epidemic, a flood, or an earthquake. Existing law also requires that use of the Service by the President should not impair the efficiency of the Service for its normal functions. This limitation is omitted from the bill because in a crisis some of the normal operations might have to yield temporarily.

The remainder of this section gives the President authority in time of war to declare the commissioned corps a military service and to make it a branch of the land and naval forces of the United States, subject, to the extent prescribed by the President, to the Articles of War and the Articles for the Government of the Navy. This provision is taken from the first sentence of section 8 (c) of Public Law 184, Seventy-eighth Congress, with the addition of a clause assuring that the commissioned corps will continue its normal functions as far as compatible with its wartime responsibilities.

## SECTION 217

Section 217 restates, with only slight modification, the present law creating and assigning functions to the National Advisory Health Council (42 U. S. C. 21) and creating the National Advisory Cancer Council (42 U. S. C. 137b). Under this section the Surgeon General will be able to use the National Advisory Health Council not only for conference work, as he may do under existing law, but also in connection with other matters related to the work of the Service. A slight change would also be accomplished in the matter of reappointments. Under the new section a member of the health council could not serve continuously for more than 5 years, or a member of the cancer council for more than 3, but such members could be reappointed if they had not served immediately prior to the proposed reappointment. Under existing law, a person who has served a term on the cancer council may not be reappointed until after the lapse of 12 months.

### TITLE III—GENERAL POWERS AND DUTIES OF THE PUBLIC HEALTH SERVICE

Title III contains the operating authority of the Public Health Service. While the greater part of this title is no more than a restatement of present law, it contains a number of sections which, either in consolidating existing provisions or in delineating more clearly the borders of existing authority, assume the appearance of new law. The few substantive changes involved are pointed out below, but the very fact that removal of uncertainties is one objective of the bill makes it difficult to indicate in all cases precisely wherein the bill differs from present law.

## PART A—RESEARCH AND INVESTIGATIONS

## SECTION 301

Part A of this title would consolidate and restate the basic authority of the Public Health Service in the whole field of research, so as to grant, in clear and unmistakable terms, broad authority to carry on investigations through its own personnel, and to cooperate and assist in the investigation by others, of all problems bearing on the physical and mental health of our people.

Under present law the research authority of the Public Health Service is no less broad, but is scattered through a number of statutes. By the act of August 14, 1912 (42 U. S. C. 7) the Service was authorized to "study and investigate the diseases of man and conditions influencing the propagation and spread thereof." Section 603 of the Social Security Act (42 U. S. C. 803) conferred a general authority for "investigation of disease and problems of sanitation." In addition, the Service has specific authorization for research work in the fields of the venereal diseases (42 U. S. C. 25), cancer (42 U. S. C. 137), and narcotics (21 U. S. C. 196). Finally, gifts may be accepted "for study, investigation, and research in the fundamental problems of the diseases of man and matters pertaining thereto" (42 U. S. C. 23b). The first sentence of section 301 would replace all of these provisions of present law by a comprehensive grant of authority.

The grant, like present law on the subject, includes certain matters which lie also within the province of other Federal agencies. With respect to research activities precise jurisdictional limitations are neither practicable nor desirable. Just as wise administration must determine in other respects what lines of research are sufficiently promising to warrant pursuit, so it must be relied upon to avoid improper duplication of effort.

For historical reasons the bill specifically includes, as matters for study, water purification, sewage treatment, and the pollution of lakes and streams. The act of 1912, after the general language quoted above, contains a specific mention of these items; and though the general language of section 301 of the bill undoubtedly embraces them, failure to list them separately might cause misunderstanding. By the specification of these subjects it is not intended to limit the scope of the general grant of authority. No similar occasion is presented for reference to other particular research functions of the Service, except with respect to narcotics, dealt with in section 302 of the bill. Under sections 301 and 302 the Service will be enabled to engage in all fields of research in which it has heretofore engaged or been authorized to engage.

The seven subsections of this section amplify, and in certain respects make more specific, the general provisions relating to research. They would grant, in the main, no new authority, although they would generalize the authority to make grants for research purposes and to secure the services of consultants, now contained only in the National Cancer Institute Act.

Subsection (a), authorizing the collection and dissemination of the results of public health research work, is taken from the last clause of 42 U. S. C. 7. The words "and other appropriate means" are added, in order to make clear that such informational media as moving pictures may be used.



Subsection (b) would permit research facilities of the Service to be made available to non-Federal public and private investigators. It is a composite of sections 8 (a) and 23 (e) of 42 U. S. C.

Subsections (c), (d), and (e), relating, respectively, to fellowships, to grants for research work, and to employing consultants, are drawn from sections 23c, 137a (e), 137d (c), 137d (d), and 137d (e) of 42 U. S. C. As stated above, the authority to make grants and to employ consultants is broadened, experience under the National Cancer Institute Act having demonstrated the value of these procedures.

Subsection (f) would permit the admission to Service hospitals of patients for study. It is derived from 24 U. S. C. 13, omitting a numerical limitation.

Subsection (g) authorizes the use of other means to carry out the purposes of the section, and is like a provision in the National Cancer Institute Act (42 U. S. C. 137d (f)).

# SECTION 302

Section 302 provides for studies, investigations, and reports with respect to narcotics. It is taken from 21 U. S. C. 196, without substantial change.

## PART B—FEDERAL-STATE COOPERATION

# SECTION 311

Section 311 is a general direction to the Surgeon General to assist and cooperate with State and local authorities in public health work, and an authorization to accept their assistance in the enforcement of Federal quarantine regulations. This section clarifies and makes more explicit the existing law contained in 42 U. S. C. 92, 92a, and 803.

# SECTION 312

Section 312, providing for conferences of State health authorities annually or upon call, is the same in substance as 42 U. S. C. 29. By reason of the definition of "State" in section 2, specific mention of the District of Columbia and the Territories is no longer necessary.

# SECTION 313

Section 313, dealing with collection of vital statistics, involves no changes of substance from 42 U. S. C. 30.

# SECTION 314

Section 314 combines, with certain changes, the provisions of title VI of the Social Security Act (42 U. S. C. 801-803) relating to grants to the States for general public-health purposes and the provisions for grants under the Venereal Disease Control Act of 1938 (42 U. S. C. 25a-25e). These two related statutes differ in many respects, in most of them without apparent reason. A few of the major differences are preserved, but others have been eliminated.

Subsection (a) contains substantially the same authority as 42 U. S. C. 25a, which is the basic authorizing section in the Venereal



Disease Control Act. Like present law, it contains an unlimited authorization to appropriate funds for this purpose.

Subsection (b) would authorize appropriations for grants for general public-health work. In lieu of a present authorization of \$11,000,000 in title VI of the Social Security Act, and a separate authorization for the pay of personnel to be detailed to assist State health authorities, this subsection would establish an over-all limitation of \$20,000,000, of which up to \$2,000,000 would be made available for such details of personnel. A spokesman for the State health authorities, as well as the Surgeon General of the Public Health Service, testified that present appropriations are inadequate; and it is manifest that these grants provide almost effective means of bringing public-health services to the people of the country.

One other change in the effect of subsection (b) results from the inclusion of the Virgin Islands in the definition of "State" in section 2. At present grants are made to those islands under the venereal-disease program but not under title VI of the Social Security Act.

The remaining subsections in this section provide the machinery for handling these grants.

Subsection (c) follows the Venereal Disease Act in directing the Surgeon General, with the approval of the Federal Security Administrator, to determine what part of the appropriations should be allotted to the States; but in the case of the general public-health grants under subsection (b) this discretion would be limited to the \$2,000,000 available for direct Federal expenditure. The basis of allotment among the States is not changed from present law, and involves consideration of population, the extent of the health problems, and the financial need of the States. Present regulations define financial need in relation to per capita income in the respective States during the preceding 5-year period. Subsection (c) would permit allotments to the States to be made "from time to time," instead of annually as under present law. The change will make for more efficient use of the funds when, for instance, a State finds in the course of a fiscal year that it cannot utilize all the money allotted to it. A similar change has been made in subsection (d) relating to payments to the States.

Subsection (e), requiring the granted funds to be expended for the stated purposes and in accordance with approved State plans, involves no change from existing law (42 U. S. C. 25 (c), 802 (d)).

Subsections (f) and (g) are not contained in either of the present statutes, but have been taken from regulations. They provide, respectively, for State matching of Federal grants, on a basis to be determined by regulations; and for withdrawal of grants if, after hearing, a State is found to have violated the law or regulations or to have misused the money. Subsection (g) is more explicit than the regulations have been in providing for an administrative hearing prior to withholding funds, and also in authorizing a partial as well as a complete withholding. The State health authorities have approved the regulations in the past and have offered no objection to incorporation of these provisions into the statute.

Subsection (h) requires consultation with State health authorities prior to the issuance of regulations, and is substantially the same as present law (42 U. S. C. 25d, 802c), except that a direction to obtain agreement from the State authorities whenever practicable has been added at their instance.

Subsection (i) is an amplification of subsection (a), and picks up some details of the present law concerning expenditures (42 U. S. C. 25a) that are omitted from that subsection.

#### SECTION 315

Section 315 provides for the issuance of information relating to the public health, "in the form of publications or otherwise," for the use of the public. It would replace certain parts of two provisions of present law (42 U. S. C. 7, 93), eliminating unnecessary detail. One omitted provision, relating to reports by consular officers, is included in section 365 (a) of the bill. The use of the words "or otherwise" in section 315 should be read with the words "and other appropriate means" in section 301 (a), referred to above.

### PART C—HOSPITALS, MEDICAL EXAMINATIONS, AND MEDICAL CARE

Part C of title III, dealing with hospital and medical care, brings together authority now scattered through many statutes.

#### SECTION 321

Section 321 (a) would furnish the general authority for the operation of hospitals and other institutions of the Service, an authority necessarily implied by various provisions of present law (see, e. g., 42 U. S. C. 6), including the annual appropriation acts. The furnishing of prosthetic and orthopedic devices where necessary would be expressly authorized, the authorization being included in this general provision in order to recognize it as a part of the medical services to which all beneficiaries of the Service would, in appropriate cases, be entitled.

Subsection (b) of this section, authorizing transfer of patients between hospitals, in the care of attendants where necessary and subsection (d), permitting the disposal of effects of deceased patients, would give statutory support to regulations of long standing.

Subsection (c) provides for the disposal of articles produced by patients in the course of their treatment. It would generalize an authority presently existing in the case of the narcotic addicts (21 U. S. C. 229).

#### SECTION 322

Section 322 (a) lists classes of persons entitled to free hospitalization and medical treatment by the Service. The first paragraph includes seamen on vessels of United States registry (42 U. S. C. 6), except those on canal boats (24 U. S. C. 12). The second paragraph covers seamen on United States or foreign-flag vessels employed by the War Shipping Administration (Public Law 17, 78th Cong.). The third relates to seamen on United States Government vessels of more than 5 tons, and those on State school ships (42 U. S. C. 6a). Under present law seamen on vessels of the Panama Canal are excluded. The bill would omit the exclusion, but as the Public Health Service has no hospital in the Canal Zone it would not affect the present arrangement by which these seamen, when in the Zone, receive hospitalization from the local government.

The fourth paragraph of this subsection covers cadets on State school ships (42 U. S. C. 6a), now known as State training ships, and is expanded to include all cadets at State maritime academies, whether ashore or afloat. The next paragraph covers seamen on vessels of the Mississippi River Commission (24 U. S. C. 26), and officers and crews of vessels of the Fish and Wildlife Service (24 U. S. C. 10). The sixth paragraph includes enrollees in the United States Maritime Service and members of the Merchant Marine Cadet Corps, who are now receiving medical care as a reimbursable transaction under the Economy Act. There is no more reason for a requirement of reimbursement in these cases than in those of other beneficiaries of the Public Health Service. The final paragraph of this subsection covers noncommissioned personnel of the Public Health Service assigned to the field service, when injured or taken sick in line of duty. While this provision continues the discrimination against the departmental non-commissioned staff, it is thought unwise to change the present law (24 U. S. C. 9; 42 U. S. C. 42, 94d) until the problem of medical care of civilian Governmental personnel can be attacked on a broader front.

Section 322 (b) provides, to the extent of available accommodations, for the hospitalization and medical care of seamen on foreign flag vessels; services to be furnished at the expense of the master, owner, or agent of the vessel. This subsection combines two provisions of present law (24 U. S. C. 11, 11a), omitting a penalty for failure to make out and render accounts for such services.

Subsection (c) would authorize care and treatment of persons detained under quarantine laws or at the request of the Immigration and Naturalization Service. This would be a new provision of basic law. So far as concerns persons detained under the immigration laws, the authority is carried in current appropriation acts (see e. g., Public Law 135, 78th Cong., "Pay of personnel and maintenance of hospitals"). With respect to quarantine laws, the section is a concomitant of sections 361 (d) and 363 of the bill, discussed below.

Subsection (d) would permit the temporary admission to Service hospitals, in cases of emergency, of persons not otherwise entitled thereto. This would be new law, although regulations have permitted such action in some cases. A hospital should not be forced to refuse emergency patients, when there may be no other facilities available.

Subsection (e) would authorize treatment of Service beneficiaries in other hospitals, at the expense of the Service, as provided in regulations. This provision, which would afford a statutory basis for present regulations, is designed to meet overflow conditions and cases where beneficiaries may be remote from any Service facility.

#### SECTION 323

Section 323 would authorize the Service to render those services in Federal penal and correctional institutions which are required by the Criminal Code.

#### SECTION 324

Section 324, again, would authorize the Service to make medical examinations and to render medical services which other statutes require to be furnished by the United States or by medical officers of the United States. Services would be provided for persons entitled



to treatment under the United States Employees' Compensation Act. Examinations might be made of employees of the Alaska Railroad; employees of the Federal Government for retirement purposes; employees in the classified service, and applicants for appointment, upon request of the Civil Service Commission; seamen for the purpose of qualifying for certificates; and employees eligible for benefits under the Longshoremen's and Harbor Workers' Compensation Act, when requested by a deputy commissioner.

## SECTION 325

Section 325 follows present law (8 U. S. C. 152) in directing the Service to make physical and mental examinations of arriving aliens. The section would add express authority to make such examinations in other countries before the aliens depart for the United States, an obviously desirable procedure whenever practicable.

## SECTION 326

Section 326 (a) combines the several provisions of present law (24 U. S. C. 8; 33 U. S. C. 763b, 869; 42 U. S. C. 42) for hospitalization and medical care of commissioned and enlisted personnel of the Coast Guard, the Coast and Geodetic Survey, and the Public Health Service. As under present law, retired as well as active personnel would be included. The last sentence, expressly authorizing detail of Public Health Service officers aboard vessels of the Coast Guard or the Coast and Geodetic Survey, is merely in amplification, in accord with present law (14 U. S. C. 59; 42 U. S. C. 17c), of the general authority; for details contained in section 214 (a).

At present there is some doubt of the entitlement of the regular Coast Guard Reserve to services from the Public Health Service, though both the regular Coast Guard personnel and the temporary reservists are clearly so entitled. The bill would eliminate this anomaly and place all such personnel on an equal footing.

Members of the Women's Reserve of the Coast Guard and certain retired personnel of the former Lighthouse Service are not included in this subsection. Provisions of law entitling these persons to hospitalization and medical care are temporary in operation, and are more appropriate to title VI of the bill.

The subsection would leave to Presidential regulations the matter of any charges to be imposed for services, and also any limitation of services to cases of disease or injury incurred in line of duty. At present the only charge is one made pursuant to regulations, in cases where a person is hospitalized who is entitled to a subsistence allowance for himself from the Government, the charge being equal to such allowance. There is at present no statutory line of duty limitation in the case of the regular Coast Guard or the Coast and Geodetic Survey, though there is such a limitation for the Public Health Service and the Coast Guard Reserve. Such a limitation is obviously inappropriate to retired officers or men, and in view of some uncertainty regarding the scope of the phrase "line of duty" it appears wiser to leave the matter to regulations.

Subsection (b) combines provisions of present law (24 U. S. C. 8; 33 U. S. C. 869) for hospitalization and medical care of the dependents



of personnel of the Coast Guard and the Coast and Geodetic Survey and adds a like provision, which is partly new and partly derived from regulations, with respect to dependents of commissioned personnel of the Public Health Service. As under present law, definition of the phrase "dependent members of families" would be left to regulations. Hospitalization may be furnished only to the extent of available accommodations, and charges are to be made. Instead of requiring the interdepartmental hospitalization rate (now \$4.25, shortly to be \$5 per day) to be charged, as does present law applicable to the Coast Guard and Coast and Geodetic Survey, the bill would permit the President to fix a different rate, which might well be lower, but which would apply uniformly to all the services. A lower rate has been prescribed under another statute for dependents of Navy personnel, including Coast Guard dependents, in Navy hospitals. It is felt that uniformity is desirable but that the interdepartmental rate may be too high.

For administrative reasons these services to dependents can hardly be rendered where the active service is intermittent or sporadic. For this reason temporary Coast Guard reservists are excluded from this subsection. Regulations might also exclude other reservists called up in time of peace for brief tours of duty.

Regulations under subsections (a) and (b) would require Presidential approval, in view of the interests of the several affected services.

Subsection (c) would make clear that the Public Health Service is to supply what is virtually a medical corps of the Coast Guard, not only serving the sick and disabled but also furnishing ancillary services such as medical examinations for purposes of appointment, retirement, and the like. This accords with practice under present law (14 U. S. C. 170; 42 U. S. C. 17c). In addition, the section authorizes medical aid to crews of vessels engaged in fishing, in accordance with present law (14 U. S. C. 61).

#### SECTION 327

This section merely makes clear that the listing of classes of Service beneficiaries does not preclude transactions under the Economy Act for the care or hospitalization by the Service of other persons whom the Government is authorized or required to care for, such as personnel of the Army and Navy.

#### PART D—LEPERS

##### SECTIONS 331 AND 332

Part D of title III, relating to lepers, would supersede the provisions of present law relating to the leper reservation in Hawaii and the leprosarium at Carville, La. (42 U. S. C. 121-135). Section 331 would permit receipt of lepers into any hospital suitable for the purpose, instead of confining such receipt to the two named institutions. Many provisions of present law are omitted as unnecessary, in view of the general authority contained elsewhere in the bill.

## PART E—NARCOTIC ADDICTS

## SECTIONS 341 TO 345

Part E, dealing with the treatment of narcotic addicts, would be principally a reenactment of present law (21 U. S. C. 222, 226, 227, 229–237). Here, again, there are omitted provisions which would be merely repetitive of authority contained elsewhere in the bill, as well as provisions fixing a rigid administrative pattern superseded by the Public Health Service Act of 1943 (see, e. g., 42 U. S. C. 223–225). In accordance with the general administrative structure, decisions in particular cases would be made by the Surgeon General rather than by the Federal Security Administrator. Here, also, present law applicable to two stated institutions is enlarged to apply to any hospital of the Service “especially equipped for the accommodation of such patients.”

Section 343 (b) would extend to narcotic prisoners the right, which they do not now have, to earn commutation for time spent working in industrial shops, on the same basis as other Federal prisoners working in prison industries; except that no such commutation should operate to release an addict before he has been cured of his addiction;

## PART F—BIOLOGICAL PRODUCTS

## SECTION 351

Section 351, relating to the licensing of manufacturers of biological products, would similarly be a reenactment of present law (42 U. S. C. 141–148) with only slight changes. The control would be extended to arsphenamines and other trivalent organic arsenic compounds, as has been done, though with less precision, in appropriation acts. Subsection (d) would furnish criteria, not expressed in the present law, to guide administrative action in the issuance of licenses. Subsection (g) is an explicit statement, confirming the present legal situation, that products subject to this section are not exempted from the Federal Food, Drug, and Cosmetic Act, except for the provision of that act relating to the licensing of new drugs.

## SECTION 352

Section 352 would authorize the Service to prepare biological products for its own use, an authority it presumably has in connection with its research and laboratory activities; for the use of other Federal departments and agencies, which it might do under the Economy Act; and for other buyers, when such products are not available from licensed manufacturers.

## PART G—QUARANTINE AND INSPECTION

Part G of title III sets out in simpler and more orderly fashion the authority of the Service in matters of interstate and foreign quarantine, now conferred in several unwieldy and overlapping statutes. It would specifically authorize extension to air travel of controls heretofore exercised principally with respect to surface transportation.

## SECTIONS 361 AND 363

The basic authority to make regulations to prevent the spread of disease into this country or between the States is contained in section 361 (a), "unencumbered by the confusing limitations found in the act of February 15, 1893 (42 U. S. C. 92). These limitations have ceased to serve any useful purpose. So, too, the act of March 27, 1890 (42 U. S. C. 95) authorizing special regulations to control cholera, yellow fever, smallpox, or plague no longer conforms to modern quarantine procedure. Section 361 (a) would also expressly sanction the use of conventional public-health enforcement methods, heretofore practiced under authority of regulations based upon implication rather than upon explicit authority (see, e. g., 42 U. S. C. 87, 94, 105). In addition, it would authorize destruction of contaminated articles or infected animals which are dangerous to man, in those cases where no other disposition is safely possible.

A provision of present law (42 U. S. C. 87) for charging vessels with the cost of fumigation and inspection would be omitted. These services are rendered only when deemed necessary to protect the public health, and are in no substantial sense services to the ship-owner.

Subsection (b) would provide that those diseases which are to be the basis for quarantine of persons must be specified in Executive orders of the President upon recommendation of the National Advisory Health Council and the Surgeon General. At present such diseases, except for a few specifically listed in statutes (see 42 U. S. C. 95, 105), are prescribed by regulation.

Subsection (c) would continue the authority, long exercised under the Quarantine Act of 1893 (42 U. S. C. 92), to apprehend, detain, and examine persons entering the country from abroad.

Subsections (b) and (c) would permit persons who are subject to detention under the foreign quarantine provisions to be released on condition; for example, on condition that they report to public-health authorities for subsequent examination. This authority is important because the speed of air travel makes it possible for persons who may have contracted disease in foreign countries to arrive in the United States before the disease has become detectable.

Subsection (d) would confer an authority, in a limited group of cases in which interstate spread of disease is particularly likely, to isolate infected persons for the purpose of interstate rather than foreign quarantine. The authority, which would be similar to the familiar quarantine power of State and local health officers, may already exist in the Public Health Service under the act of 1893 (see also, 42 U. S. C. 25). The bill would also confer, in section 363, a like authority in time of war, which does not now exist, for the protection of members of the armed forces and civilian war workers. Persons detained under either of these provisions would be entitled to medical treatment, in accordance with section 322 (c).

In some situations State and local quarantine measures afford inadequate protection to other States, and for half a century the Public Health Service has been charged with the responsibility of preventing the interstate spread of disease. Under present conditions the only diseases which might call into play a Federal authority to isolate infected persons are the venereal diseases, experience having shown that many of those who chiefly spread such diseases move from



place to place so rapidly as to make State and local enforcement measures largely ineffectual. Even those sources who do not themselves move about, it can be shown, often infect so many persons that, by reason of the present-day mobility of our population, infection quickly appears in other States. Section 361 (d) would be applicable to those who are themselves in or about to enter interstate commerce, and also to those who, because of the frequency with which they expose others to disease, constitute a direct threat of its spread across State lines.

In view of the possible impact, especially in the post-war period, of other diseases than the venereal, and the impossibility of foreseeing what preventive measures may become necessary, the provisions of this subsection are written broadly enough to apply to any disease listed by the President as quarantinable, if the National Advisory Health Council recommends, and the Surgeon General and the Federal Security Administrator thereupon determine, that the disease requires invocation of these provisions.

#### SECTION 362

Section 362 would reenact a provision of present law (42 U. S. C. 111) authorizing the suspension of travel of persons and shipment of goods from any foreign country where a communicable disease exists, if there is found to be serious danger of introduction of the disease into the United States. Consistently with the general administrative pattern in the bill, the authority now lodged in the President would be placed in the Surgeon General, to be exercised under Presidential regulations.

#### SECTION 364

Section 364 (a), relating to quarantine stations, again is a condensation of several provisions of existing law (42 U. S. C. 92, 102, 103, 105). The requirement of Presidential approval for the selection of sites for quarantine stations would be new, the reason for this change being that other agencies of the Federal Government besides the Federal Security Agency are concerned with the location of such stations. This appears to be the most convenient procedure for assuring the necessary concurrence of the several departments.

There are in present law several provisions bearing on the acquisition and designation of such sites. One of them (42 U. S. C. 104) requires other departments of the Government which may have custody of the land or water involved to turn it over to the Federal Security Administrator. If title is not in the United States the Federal Security Administrator is authorized to buy the site at a reasonable price, if possible, and otherwise to ask the Attorney General to institute condemnation proceedings. There is provision, further (42 U. S. C. 105), for the publication in newspapers of notice of the selection and designation of the sites. These provisions, which are still on the statute books, do not appear to serve any function at the present time.

Subsection (b) provides for fixing the hours of service at quarantine stations, and does not change present law (42 U. S. C. 92a), except that it eliminates the requirement that the hours be fixed "by regulation." In view of the fact that uniform hours are not required, the formal procedure of regulations is unduly cumbersome.



## SECTION 365

Section 365 (a) requires reports of health conditions to be made by consuls at intervals prescribed by the Surgeon General, instead of weekly as under present law (42 U. S. C. 93).

Subsection (b), requiring customs and Coast Guard officers to aid in the enforcement of quarantine regulations, involves no change in existing law (42 U. S. C. 97).

## SECTION 366

Section 366 relating to bills of health involves no substantial change of law, but again, the provisions (42 U. S. C. 82) have been rearranged and simplified.

## SECTION 367

The next section, 367, would authorize the Surgeon General, under regulations approved by the Federal Security Administrator, to make applicable to civil air navigation any of the provisions (and regulations prescribed thereunder) of sections 364, relating to quarantine stations, 365, relating to the duties of customs and Coast Guard officers to enforce quarantine regulations, and 366, relating to bills of health. Any of these provisions could be made applicable to such extent and upon such conditions as are necessary for the safeguarding of the public health.

## SECTION 368

Section 368 brings together and makes more consistent a variety of penalty provisions contained in the present quarantine laws (see 42 U. S. C. 85, 102, 106, 108). It also clarifies the application of the penalty provisions in certain situations—notably with respect to interstate quarantine regulations—where the present wording of the statute (42 U. S. C. 102) makes their application doubtful. It will be noted that the bill provides a maximum penalty of \$1,000 or 1 year imprisonment, or both, for violation of any regulations under this part, or for unauthorized entry upon or departure from quarantine stations.

Subsection (b) treats in a similar manner the forfeiture provisions now contained in the quarantine laws (42 U. S. C. 81).

Subsection (c) continues the present authority contained in 18 U. S. C. 642, as extended to the Federal Security Administrator by two reorganization provisions, to remit or mitigate forfeitures provided under subsection (b).

## SECTION 369

Section 369, relating to the administration of oaths, would reenact present law (42 U. S. C. 99).

## TITLE IV—NATIONAL CANCER INSTITUTE

## SECTIONS 401 TO 406

Title IV would reenact the National Cancer Institute Act, omitting those provisions which would merely repeat authority granted elsewhere in the bill. The institute would be a division in the National Institute of Health.

The National Cancer Institute has served as a precedent for centralizing and unifying the attack upon a single disease. The provisions which would be continued in title IV may well furnish a model in case the Congress should, in the future, wish to launch a similar attack upon some other disease or group of diseases.

### TITLE V—MISCELLANEOUS

Title V is composed of several miscellaneous provisions of permanent law, which do not fit conveniently under other titles.

#### SECTION 501

Section 501 authorizes the Federal Security Administrator to accept gifts and provides for the handling and use thereof. Existing law contains three authorizations to accept gifts, one relating to gifts for study, investigation, and research in the fundamental problems of the diseases of man and matters pertaining thereto (42 U. S. C. 23b), the second relating specifically to cancer (42 U. S. C. 137c), and the third relating to gifts to marine hospitals (24 U. S. C. 2). Section 501 effects a consolidation of the existing provisions and encompasses gifts for the benefit of the Service or for carrying out any of its functions. It is patterned after one of the more recent congressional enactments relating to gifts to Government agencies. This statute (24 U. S. C. 181-184), passed in 1941 and applicable to gifts to St. Elizabeths Hospital, provides satisfactory machinery for the handling of gifts and spells out the procedures for such handling more fully than does any of the present law applicable to the Public Health Service.

#### SECTION 502

Section 502 provides for use of hospitals at immigration stations of the Immigration and Naturalization Service by the Public Health Service to care for its patients, in accordance with agreements between the departments concerned. It provides for reimbursement for such use and also requires reimbursement of the Public Health Service by the Immigration and Naturalization Service for patients not entitled to free care and treatment who are detained at Public Health Service hospitals upon the request of the immigration authorities. These provisions are a modification of language drawn from annual appropriation acts (see, for example, the first proviso under the subheading "Pay of personnel and maintenance of hospitals" under the heading "Public Health Service" in title II of the Labor-Federal Security Appropriation Act, 1944 (Public Law No. 135, 78th Cong.)). Under the appropriation language, the use of immigration hospitals is limited to Ellis Island and is mandatory upon the Immigration and Naturalization Service. The new provision would make the matter one for agreement between the agencies concerned, but would extend the use to hospitals at all immigration stations.

#### SECTION 503

Section 503 requires that money received by the Surgeon General for care and treatment of foreign seamen and of pay patients shall be covered into the appropriation from which the expenses of such care

and treatment were paid. Present law generally requires such receipts to be covered into miscellaneous receipts of the Treasury (42 U. S. C. 33a), although there are certain exceptions (see, e. g., 24 U. S. C. 8; 33 U. S. C. 869).

## SECTION 504

Section 504 requires admission of insane patients of the Service to St. Elizabeths Hospital or any hospital of the Service especially equipped for their care and treatment. So far as concerns entitlement to care, this is merely a restatement of existing law with respect to St. Elizabeths Hospital (24 U. S. C. 193), and also with respect to hospitals of the Service inasmuch as persons entitled to treatment by the Service when ill do not lose entitlement merely because the illness is mental. The requirement that St. Elizabeths Hospital be reimbursed by the Service for care of Service patients has been omitted. The reimbursement procedure is a cumbersome one to follow as between units of the Federal Security Agency, especially in view of the fact that some of the St. Elizabeths' patients are now being cared for at two Public Health Service hospitals, sometimes requiring a second reimbursement.

## SECTION 505

Section 505 reenacts with respect to the Service, with only slight changes in wording and no change in substance, a 1936 statute applicable to both the Public Health Service and the Coast Guard (14 U. S. C. 71). It authorizes the Federal Security Administrator to determine claims for damages for which vessels of the Service are responsible if the claim is presented within 1 year of its accrual. The amounts determined by him are to be reported to Congress for payment out of appropriations made by it for such purpose. Acceptance of such payment is deemed to be full and final settlement of the claim.

## SECTION 506

Section 506 continues existing law with some modification. It provides for paying the cost of burial and transportation to the place of burial of the remains of commissioned officers and personnel, specified in regulations, who die in line of duty. Existing law (42 U. S. C. 68) applies to all officers of the Service, which includes higher ranking civilian personnel as well as commissioned officers, and covers the cost of preparation for "shipment," which seems to rule out any payment in case no shipment is required. In addition, the new section differs from existing law by providing for shipment to the place of burial instead of to the officer's former home, and so would include shipment, for instance, to a national cemetery.

## SECTION 507

Section 507 provides for settlement of the accounts of deceased officers by payment to designated relatives where no demand is presented by a duly appointed representative of the decedent's estate and the amount due the estate is less than \$1,000. This is not, however, to prevent the payment of funeral expenses to the one who paid for them if a claim therefor is presented before the account has been settled. This section is the same as existing law (42 U. S. C. 69) except that the figure \$1,000 has been substituted for \$500.



#### SECTION 508

Section 508, providing for the transfer of funds between appropriations, is necessary to take care of any reorganizations effected under section 202. It is a reenactment of the second sentence of section 11 of the Public Health Service Act of 1943.

#### SECTION 509

Section 509, relating to the availability, for specified items, of appropriations for carrying out section 301, is a continuation of existing law without any change in substance (42 U. S. C. 23d). The bill omits, however, a restriction upon use of funds of the Service for advertising (42 U. S. C. 33), inasmuch as the functions of the Service might make this method of spreading information important in case of epidemic.

#### SECTION 510

Section 510 would impose penalties for unauthorized wearing of Public Health Service uniforms, like those now imposed (10 U. S. C. 1393) in the case of the Army uniforms.

#### SECTION 511

Section 511, which requires a full report by the Surgeon General to the administrator for submission to Congress at the beginning of each regular session, is substantially a reenactment of existing law (42 U. S. C. 4) requiring the report to be transmitted annually.

### TITLE VI—TEMPORARY AND EMERGENCY PROVISIONS AND AMENDMENTS AND REPEALS

Title VI of the bill includes temporary and emergency provisions, repeals of existing statutes, and an amendment to the statute providing for compensation for injured employees of the United States.

#### SECTION 601

Section 601 is designed to assure that enactment of this bill will not affect the term or tenure of office of existing personnel, or abolish existing positions or units of the Service, except as a reorganization may be effected under the terms of the bill.

#### SECTION 602

Section 602 would preserve existing regulations until repealed or superseded by regulations under the proposed new statute, inasmuch as revision of the large number of rules, regulations, and Executive orders now in force will be a time-consuming undertaking.

#### SECTION 603

Section 603 is designed to assure continuing availability of the Service's properties, appropriations, and other funds.



## SECTION 604

Section 604 authorizes, during the war and the demobilization period after the war, the appropriation of funds to enable the Surgeon General, either directly or through State health authorities, to conduct health and sanitation activities in and around Government and private plants engaged in war work, and in and around certain military areas. This is substantially the same as the language now contained in annual appropriations to the Service (see, e. g., the subheading "Emergency health and sanitation activities (national defense)" under the heading "Public Health Service" in title II of the Labor-Federal Security Appropriation Act, 1944 (Public Law No. 135, 78th Cong.)).

## SECTION 605

Section 605, which amends sections 7 and 40 of the United States Employees' Compensation Act, is based upon sections 9 and 10 of Public Law 184, Seventy-eighth Congress.

Subsection (b) is the principal operative provision of section 605. It amends section 40 of the United States Employees' Compensation Act, which defines the term "employee" to include commissioned officers of the regular corps, and of the reserve when on active duty, thereby giving such officers the benefits of that act for injuries or death in the performance of their duties.

Subsection (a) amends section 7 of the Compensation Act so as to require an election between benefits under that act and any other benefits payable by the United States by reason of the same death or injury, if the benefits are based on services as a Federal employee. The two subsections have the same effect as section 9 of Public Law 184, except insofar as the amendment accomplished by subsection (a) would (subject to subsections (c) and (d) with respect to deaths occurring during the present war) require the election to be made within 1 year of the injury or death, or such further time as the Employees' Compensation Commission may for good cause allow, and would make such an election irrevocable. These changes were made because your committee believes they are necessary to the effectiveness of the statutory requirement of an election and to the administration thereof.

Subsection (c), with respect to deaths or injuries occurring after the enactment of Public Law 184 and not later than the end of the war, permits the election to be made and revised retroactively, and permits the notice required by section 15 and the written claim required by section 18 of the Compensation Act to be filed within such time as the Employees' Compensation Commission may by regulation prescribe, but not later than 1 year after the end of the war. This permission to extend the time limitations was thought desirable at this time because the uncertainties resulting from the condition of war might make strict compliance with the statutory provisions difficult and inequitable in many cases, particularly where officers are reported as missing in action and the actual date of death is difficult to determine.

Subsection (d) continues the rights, under section 10 of Public Law 184, of surviving beneficiaries of commissioned officers who died after December 7, 1941, and prior to the enactment of that law. Under section 10 such beneficiaries were entitled to 6 months' pay and, unless

entitled to veterans' benefits, to the benefits of the United States Employees' Compensation Act. The new provision would modify this slightly by giving them the same right of election and of revising elections as is provided for others under subsection (c).

## SECTION 606

Section 606 provides for counting civilian service in the Public Health Service in determining the retired pay of officers appointed prior to enactment of this bill who were over 45 at the time of original appointment. This provision is applicable to a small group of officers who in 1930 first became eligible for the commissioned corps, and who have not yet reached retirement age. With respect to these individuals, civilian service is to be counted for retirement purposes under existing law (42 U. S. C. 39, 66). The section would change the law in that this benefit would not be given to future appointees.

## SECTION 607

Section 607 provides the same uniform allowance to officers appointed or called to active duty after December 7, 1941, who were on active duty on or after the date of enactment of Public Law 184, Seventy-eighth Congress, as is provided in section 213 for those called to active duty or appointed in the future.

## SECTION 608

Section 608 permits hospitals of the Service to continue care and treatment after the war of St. Elizabeths patients, admitted to such hospitals of the Service during the present war pursuant to Executive Order 9079. After the war, the authority to care for these patients pursuant to the Executive order would end, and the proposed section is merely intended to prevent the necessity of turning out such patients at that time.

## SECTION 609

Section 609 permits the appointment as reserve officers, during the war and for 6 months thereafter, of graduates of reputable osteopathic hospitals. This is a reenactment of the last sentence in section 4 of Public Law 184, Seventy-eighth Congress.

## SECTION 610

Section 610 contains temporary provisions for the medical care and hospitalization of members of the Women's Reserve of the Coast Guard, and of certain retired personnel of the former Lighthouse Service.

## SECTION 611

This section would repeal the provisions of existing law which would be superseded by the present bill, as well as certain obsolete statutes bearing on the functions of the Public Health Service.

## SECTION 612

Section 612 is a provision preserving existing rights and liabilities under the statutes repealed.

## SUMMARY OF STATUTES REPEALED

On account of the difficulties involved in literally complying with the requirements of paragraph 2a of rule XIII of the Rules of the House of Representatives, and because of the printing expense which would be involved in attempting to set forth the exact text of the many provisions of law the repeal of which is proposed by the bill, the committee is of the opinion that the only practicable method of informing the House regarding these repealed provisions is to include in the report a summary of such provisions. Such a summary is set forth below. In the left-hand column reference is made to the basic law being repealed, in the center column the repealed provision is summarized, and in the right-hand column there is indicated the section or sections of the bill dealing with the subject matter of the repealed provision. It will be noted that in the case of obsolete provisions, the substance of which has not been incorporated in the bill, no section reference appears in the right-hand column.

| Citations of provisions to be repealed | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Sections of H. R. 4624 dealing with the subject matter |
|----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| R. S. 3639-----                        | Permanent annual appropriations for various purposes, including appropriation of moneys collected for care of sick and disabled seamen, and of proceeds of sale of marine hospitals.                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                        |
| R. S. 4801-----                        | Authorization to the President to receive donations for hospitals for sick and disabled seamen.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 501 (a).                                               |
| R. S. 4802-----                        | Authorization to Secretary of Treasury to appoint supervising surgeon of Marine hospitals with salary of \$2,000 per annum; monthly reports to Secretary required.                                                                                                                                                                                                                                                                                                                                                                                                                                       | 204; 206 (a); 511.                                     |
| R. S. 4803-----                        | Tax on seamen for hospital purposes to be collected by customs collectors and placed in fund for and used for relief of sick and disabled seamen employed in United States vessels.                                                                                                                                                                                                                                                                                                                                                                                                                      | 322 (a) (1).                                           |
| R. S. 4804-----                        | Persons employed in connection with canal boats in coasting trade not thereby entitled to benefits from the seamen's fund.                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Do.                                                    |
| R. S. 4805-----                        | Sick foreign seamen admitted to marine hospitals, if convenient, on application of master of vessel with charge of 75 cents per day to be paid by master. No vessel granted clearance until money paid.                                                                                                                                                                                                                                                                                                                                                                                                  | 322 (b).                                               |
| R. S. 4806-----                        | Secretary of Treasury may lease or sell at public auction certain marine hospitals.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                        |
| Ch. 130, 13 Stat. 371, at 377-----     | Last full paragraph under heading "Miscellaneous": Salary of Supervising Surgeon General of the Marine Hospital Service to be paid out of marine hospital fund, at the rate of \$4,000 per annum; surgeon general to be appointed by the President with the consent of the Senate.                                                                                                                                                                                                                                                                                                                       | 204; 206 (a).                                          |
| Ch. 156, 18 Stat. 455-----             | Sec. 1: Secretary of the Treasury to prepare schedule of average number of seamen required for navigation of United States vessels to use as basis for hospital-dues collected from each master or owner who may deduct the dues from the seamen's wages.<br>Sec. 2: Vessels subject to hospital-tax to keep record in a time-book of all seamen employed thereon under penalty of \$50 for each one omitted.<br>Sec. 3: "Seamen" defined for purposes of marine-hospital legislation.<br>Sec. 4: Secretary of the Treasury may rent or lease hospital buildings; proceeds appropriated for the Service. | 2 (h).                                                 |

| Citations of provisions to be repealed | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Sections of H. R. 4624 dealing with the subject matter |
|----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| Cb. 156, 18 Stat. 485.....             | Sec. 5: Insane patients of the service to be admitted to Government hospital for the insane with a charge of not to exceed \$4.50 per week payable from marine-hospital fund.<br>Sec. 6: Authorization to service to care for seamen on foreign vessels and vessels not subject to hospital dues under regulations of, and at rates fixed by, the Secretary of the Treasury.<br>Sec. 7: Salary of supervising surgeon set at \$4,000 per annum payable from the marine-hospital fund.<br>Sec. 8: Inconsistent statutes repealed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 504.<br>322 (b).<br>206 (a).                           |
| Cb. 66, 20 Stat. 37.....               | Sec. 1: Vessels from foreign ports or countries where contagious disease exists, or carrying any persons, animals, or merchandise infected with any such disease, prohibited from entering any State contrary to its quarantine laws except under regulations prescribed under this act.<br>Sec. 2: Consular officers at or nearest a foreign port required to report, to supervising surgeon general and health officer at point of destination, the departure of vessels therefrom for United States when port is infected with contagious disease or the vessel carries persons or articles from a place infected with cholera or yellow fever; weekly reports to him on sanitary condition of ports at which stationed also required of such officers; administration by Surgeon General under supervision of Secretary of the Treasury, with regulations to be approved by the President and not to conflict with any laws or regulations of State or local authorities.<br>Sec. 3: Medical officers of the Service and customs officers to aid in enforcement national regulations established under sec. 2, without additional compensation.<br>Sec. 4: Surgeon General to notify Federal, State, and local authorities of information received under sec. 2.<br>Sec. 5: Officers and agents of State or local quarantine system authorized to act as officers or agents of national quarantine system, without Federal compensation. At ports where there is no such State or local system, officers or agents of the Service shall perform duties assigned by the Surgeon General in connection with national quarantine regulations, but without interference with any State quarantine laws and regulations.<br>Sec. 6: Inconsistent statutes repealed. | 365 (a).<br>365 (b).<br>315.<br>311.                   |
| Ch. 202, 20 Stat. 484.....             | Sec. 1: Creates National Board of Health of 7 compensated members, plus 4 members from Government departments.<br>Sec. 2: Board to obtain information and advise the Government, the States, and the District of Columbia on the preservation and improvement of the public health.<br>Sec. 3: Board to cooperate with Academy of Science and report to Congress a plan for a national public-health organization, with special attention to quarantine system.<br>Sec. 4: Appropriation for salaries and expenses.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 217 (a) and (b).<br>391 (a); 315.                      |
| Ch. 61, 21 Stat. 46.....               | Sec. 1: National Board of Health authorized to rent office space in Washington, D. C.<br>Sec. 2: Printing of Board to be done at Government Printing Office, up to cost of \$10,000 per year.<br>Sec. 3: Board authorized to have report of Board of Medical Experts printed.<br>Sec. 4: Board authorized to pay stenographer.<br>Sec. 5: Clerk of Board to act as disbursing agent.<br>Sec. 6: Act of June 2, 1879, amended to add provision that Board is authorized to erect temporary quarantine buildings.<br>Sec. 7: Expenditures to be paid out of appropriation under act of June 2, 1879.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 509.<br>364 (a).                                       |
| Ch. 727, 25 Stat. 355.....             | Sec. 1: Misdemeanor to trespass on quarantine reservation, or for vessel to enter port in violation of act of Apr. 29, 1878.<br>Sec. 2 (final clause): Quarantine stations to be conducted by Marine Hospital Service.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 368 (a); 366 (e).<br>364 (a).                          |



| Citations of provisions to be repealed | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Sections of H. R. 4624 dealing with the subject matter                                                           |
|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| Ch. 19, 25 Stat. 639.....              | <p>Sec. 1: Medical officers of Marine Hospital Service appointed by President with consent of Senate, but only after passing an examination under rules of the Surgeon General approved by the Secretary of the Treasury and the President.</p> <p>Sec. 2: Original appointments only to rank of assistant surgeon; rules for advancement above that rank.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <p>203; 208 (a) (1).</p> <p>208 (a) (1); 210 (a).</p>                                                            |
| Ch. 51, 26 Stat. 31.....               | <p>Sec. 1: President authorized to cause Secretary of Treasury to issue regulations prepared by the Supervising Surgeon General of the Marine Hospital Service to prevent interstate spread of certain diseases; willful violation is misdemeanor.</p> <p>Sec. 2: Willful violation of quarantine laws or regulations by quarantine official is misdemeanor.</p> <p>Sec. 3: Willful violation of quarantine laws or regulations by common carrier is misdemeanor.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <p>361 (a).</p> <p>368 (a).</p> <p>Do.</p>                                                                       |
| Ch. 541, 26 Stat. 908, 923.....        | <p>Last sentence of paragraph headed "Office of Supervising Surgeon General, Marine Hospital Service:" Detail authorized of 2 surgeons and 2 passed assistant surgeons to the Bureau.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <p>214 (a).</p>                                                                                                  |
| Ch. 114, 27 Stat. 449.....             | <p>Sec. 1: Vessel violating quarantine laws or regulations shall forfeit \$5,000 to the United States.</p> <p>Sec. 2: Vessel at foreign port clearing for United States must obtain bill of health; President may detail medical officer to serve in consul's office of foreign port; vessel entering United States without bill of health shall forfeit \$5,000 to United States.</p> <p>Sec. 3: Supervising Surgeon General of Marine Hospital Service shall cooperate with State and municipal boards of health to enforce their regulations and Treasury regulations in regard to spread of disease; Secretary of the Treasury may issue additional regulations where local regulations are inadequate.</p> <p>Sec. 4: Weekly sanitary reports to be made by consuls to Secretary of the Treasury, who shall publish and distribute the information to designated authorities.</p> <p>Sec. 5: Secretary of the Treasury to issue regulations to secure sanitary conditions on foreign vessels coming to the United States; health officer at port of entry to issue certificate of compliance with regulations.</p> <p>Sec. 6: Infected vessel arriving at United States port, where there are no facilities for treatment, may be remanded at its own expense to nearest quarantine station; may be admitted to United States on certificate of health from that station.</p> <p>Sec. 7: President shall have power to suspend entry of persons and property from country where there is a contagious or infectious disease.</p> <p>Sec. 8: Secretary of the Treasury to compensate State for use of buildings and disinfecting apparatus at State quarantine station.</p> <p>Sec. 9: Repeal of act of Mar. 3, 1879.</p> | <p>368 (b).</p> <p>366 (a); 363 (b).</p> <p>361 (a); 311.</p> <p>365 (a); 315.</p> <p>366 (a), (c), and (e).</p> |
| Ch. 174, 28 Stat. 162, 179.....        | <p>Last sentence of paragraph headed "Office of Supervising Surgeon General, Marine Hospital Service:" Supervising Surgeon General authorized to detail additional medical officer and 1 hospital steward for duty in the Bureau.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <p>214 (a).</p>                                                                                                  |
| Ch. 213, 28 Stat. 229.....             | <p>Keepers and crews of lifesaving service eligible for admission and temporary treatment at marine hospitals.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | <p>326 (a).</p>                                                                                                  |
| Ch. 300, 28 Stat. 372.....             | <p>Quarantine provisions not applicable to vessels plying between foreign ports near United States frontiers and adjacent United States ports; but are subject to regulations Secretary of the Treasury deems necessary.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <p>366 (d).</p>                                                                                                  |
| Ch. 177, 28 Stat. 764, 780.....        | <p>Last sentence of paragraph headed "Office of the Supervising Surgeon General, Marine Hospital Service:" Supervising Surgeon General authorized to detail 2 hospital attendants from port of New York for duty in the laboratory of the Bureau.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <p>214 (a).</p>                                                                                                  |
| Ch. 265, 29 Stat. 538, 554.....        | <p>Proviso at end of paragraph headed "Office of the Supervising Surgeon General, Marine Hospital Service:" Secretary of the Treasury authorized to grant to medical officers of the Service leaves of absence, without deduction of pay, corresponding to those of Army officers.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <p>209 (c).</p>                                                                                                  |

| Citations of provisions to be repealed | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Sections of H. R. 4624 dealing with the subject matter |
|----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| Ch. 349, 30 Stat. 976.....             | Supervising Surgeon General to appoint commission of medical officers of Service to investigate origin and prevalence of leprosy.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 301.                                                   |
| Sec. 10, Ch. 191, 31 Stat. 77, 80.     | Quarantine stations to be established in Puerto Rico and quarantine regulations to be under control of the United States.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 364 (a).                                               |
| Sec. 97, Ch. 339, 31 Stat. 141, 160.   | First paragraph: Quarantine stations to be established in Territory of Hawaii and quarantine regulations to be under control of the United States; health laws of Hawaii to remain in jurisdiction of government of Territory of Hawaii, subject to quarantine laws and regulations of the United States.                                                                                                                                                                                                                                                                                                                  | Do.                                                    |
| Ch. 836, 31 Stat. 1086.....            | Amends act of Feb. 15, 1893: Supervising Surgeon General with the approval of the Secretary of the Treasury authorized to establish boundaries of quarantine grounds; misdemeanor to trespass thereon; misdemeanor to violate provisions of act or regulations relating to inspection of vessels, etc.; vessels from foreign ports without bill of health not entering United States port shall be subject to quarantine measures prescribed by Secretary of the Treasury, the cost of which is a lien on the vessel; medical officers acting as quarantine officers authorized to administer oaths in quarantine matters. | 364 (a); 368 (a); 369.                                 |
| Sec. 84, Ch. 1369, 32 Stat. 691, 711.  | Part of third paragraph: Public health and quarantine laws shall apply to vessels entering a United States port from the Philippine Islands.                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 361 (a).                                               |
| Ch. 1370, 32 Stat. 712.....            | Sec. 1: Change of name from Marine-Hospital Service to Public Health and Marine-Hospital Service. Duties and appropriations of old Service applicable to the new.                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                        |
|                                        | Sec. 2: Salaries of Surgeon General and commissioned medical officers specified.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 206 (a); 209 (a) and (b).                              |
|                                        | Sec. 3: Commissioned medical officers detailed by Surgeon General to administrative divisions in Washington, D. C., shall, while serving, be assistant surgeons general.                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 205 (b).                                               |
|                                        | Sec. 4: President authorized to use Service in time of threatened or actual war to promote public interest.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 216.                                                   |
|                                        | Sec. 5: Advisory board for hygienic laboratory authorized.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 217 (a).                                               |
|                                        | Sec. 6: Surgeon General to appoint competent persons to act as division chiefs of hygienic laboratory when commissioned medical officers are not available.                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 208 (b).                                               |
|                                        | Sec. 7: Surgeon General may call conference of State health and quarantine officers, in interests of public health, and shall call an annual conference.                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 312.                                                   |
|                                        | Sec. 8: Surgeon General to distribute forms for collection of vital statistics after the annual conference.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 313.                                                   |
|                                        | Sec. 9: President to issue rules for conduct of Service and uniforms. Surgeon General to make annual report to the Congress.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 215 (a); 511.                                          |
| Ch. 1378, 32 Stat. 728.....            | Sec. 1: Sale in District of Columbia and interstate commerce and importation of biological products forbidden unless they are prepared at a licensed establishment and properly labeled.                                                                                                                                                                                                                                                                                                                                                                                                                                   | 351.                                                   |
|                                        | Sec. 2: False labels prohibited.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Do.                                                    |
|                                        | Sec. 3: Inspection of manufacturing establishments authorized.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Do.                                                    |
|                                        | Sec. 4: Surgeon Generals of Army, Navy, and Marine Hospital Service authorized to act as a board to issue regulations for licensing establishments to prepare biological products. Inspection of establishments in foreign country required as a condition to licensing.                                                                                                                                                                                                                                                                                                                                                   | Do.                                                    |
|                                        | Sec. 5: Secretary of the Treasury authorized to enforce act and suspend licenses.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Do.                                                    |
|                                        | Sec. 6: No person shall interfere with an employee of the Treasury Department in performance of duties under act.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Do.                                                    |
|                                        | Sec. 7: Punishment for violation of act.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Do.                                                    |
| Ch. 1443, 33 Stat. 1009.....           | Sec. 8: Repeal of inconsistent provisions.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                        |
|                                        | Sec. 1: Establishment of hospital for lepers at Molokai, T. H.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 331.                                                   |
|                                        | Sec. 2: Secretary of the Treasury authorized to erect buildings.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                        |
|                                        | Sec. 3: Surgeon General authorized to receive up to 40 lepers committed by legal authorization of the Territory of Hawaii.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Do.                                                    |

| Citations of provisions to be repealed                                                                                                                                                                                                                                                                                                                                         | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Sections of H. R. 4624 dealing with the subject matter |
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| Ch. 1443, 33 Stat. 1009 .....                                                                                                                                                                                                                                                                                                                                                  | Sec. 4: Surgeon General authorized to detail medical officers and employees to station.<br>Sec. 5: Appropriation for station.<br>Sec. 6: Surgeon General, subject to approval of the Secretary of the Treasury, authorized to issue regulations.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 331.<br><br>Do.                                        |
| Ch. 1484, 33 Stat. 1214, 1217. ....                                                                                                                                                                                                                                                                                                                                            | Sec. 7: Officer detailed to this station shall receive additional pay of one-half of his grade, subject to approval of the Secretary of the Treasury.<br>Last sentence of last paragraph under the head, "Public Health and Marine Hospital Service": "The Secretary of the Treasury shall submit annually to Congress detailed estimates of expenses of Public Health and Marine Hospital Service."                                                                                                                                                                                                                                                                                                                                             | 209 (g).<br>511.                                       |
| Public Res. No. 21, 33 Stat. 1283.<br>Ch. 3433, 34 Stat. 299. ....                                                                                                                                                                                                                                                                                                             | Authorizes printing of bulletins of hygienic laboratory and yellow fever institute.<br>Sec. 1: Secretary of the Treasury authorized to manage quarantine stations and establish them near coast and on border, and at the Dry Tortugas, to prevent introduction of yellow fever.<br>Sec. 2: Title to land and water to be transferred by other Government departments; purchase or condemnation of private lands provided for.<br>Sec. 3: Publication of notice of designation of stations.<br>Sec. 4: Unauthorized entry or departure from station is misdemeanor.<br>Sec. 5: Acquisition of State or municipal stations.<br>Sec. 6: Cession of jurisdiction by State of local station acquired by the United States.<br>Sec. 7: Appropriation. | 301 (a).<br>364.<br><br><br><br><br><br>368 (a).       |
| Sec. 17, Ch. 1134, 34 Stat. 898, 903.                                                                                                                                                                                                                                                                                                                                          | Medical examination of all arriving aliens by medical officers of the Public Health Service (with reimbursement).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 325.                                                   |
| Ch. 200, 35 Stat. 373. ....                                                                                                                                                                                                                                                                                                                                                    | That portion of the third paragraph under the head "Back pay and bounty", as amended by ch. 213, 52 Stat. 352, which refers to the Service: Authorizes the settlement of accounts of deceased commissioned officers of the Public Health Service where the amount due the estate of the deceased is less than \$500 and no demand is presented by the representative of the estate.                                                                                                                                                                                                                                                                                                                                                              | 507.                                                   |
| Ch. 285, 36 Stat. 1363, 1394, and substantially similar provisions appearing under head "Public Health and Marine Hospital Service" or "Public Health Service" in the following statutes: Ch. 355, 37 Stat. 417, 435; 37 Stat. 417, 435; Ch. 3, 38 Stat. 4, 24; Ch. 209, 39 Stat. 262, 278; Ch. 28, 40 Stat. 459, 468; Ch. 113, 40 Stat. 634, 644; Ch. 24, 41, Stat. 163, 175. | Proviso in tenth paragraph (eighth paragraph on p. 1394) under the head "Public Health and Marine Hospital Service": "Authorizes the admission for study of not more than 10 persons in any marine hospital at one time suffering with infectious or other diseases affecting the public health."                                                                                                                                                                                                                                                                                                                                                                                                                                                | 301 (f).                                               |
| Ch. 288, 37 Stat. 309. ....                                                                                                                                                                                                                                                                                                                                                    | Sec. 1: Changes name of Public Health and Marine Hospital Service to Public Health Service; authorizes investigation of diseases of man and conditions influencing their propagation and spread, including sanitation, sewage and the pollution of navigable streams and lakes, and the publication of information.<br>Sec. 2: Specifies salaries of commissioned medical officers of the Public Health Service.                                                                                                                                                                                                                                                                                                                                 | 301, 315.<br>209.                                      |
| Ch. 149, 37 Stat. 912, 915. ....                                                                                                                                                                                                                                                                                                                                               | Proviso at end of last paragraph under head "Public Health Service": Provides that director of hygienic laboratory shall receive pay and allowances of a senior surgeon.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 206 (a).                                               |
| Ch. 3, 38 Stat. 4, 23. ....                                                                                                                                                                                                                                                                                                                                                    | Part of second paragraph under the head "Public Health Service": Provides that at least 6 of the assistant surgeons shall have special training in the diagnosis of insanity in connection with duty of the examination of arriving aliens.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                        |
| Ch. 3, 38 Stat. 4, 24. ....                                                                                                                                                                                                                                                                                                                                                    | Proviso at end of twelfth paragraph under head "Public Health Service": authorizes commissioned officers, pharmacists, and those employees of the Service devoting all their time to field work, to receive hospital relief when taken sick or injured in line of duty.                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 322 (a) (7); 326 (a) (3).                              |
| Ch. 124, 38 Stat. 387. ....                                                                                                                                                                                                                                                                                                                                                    | Last clause: Authorizes Secretary of the Treasury to detail for duty on revenue cutters surgeons and other persons of the Public Health Service.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 326 (c).                                               |

| Citations of provisions to be repealed                                | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Sections of H. R. 4624 dealing with the subject matter |
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| Ch. 414, 39 Stat. 536, 538. ....                                      | Sec. 5: Authorizes lightkeepers and assistant lightkeepers of the Lighthouse Service to receive medical relief at Public Health hospitals.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 326 (a).                                               |
| Ch. 26, 39 Stat. 872. ....                                            | Sec. 1: Authorizes Secretary of the Treasury to procure site for establishment of home for care of lepers.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 331.                                                   |
|                                                                       | Sec. 2: Authorizes admission of lepers. ....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Do.                                                    |
|                                                                       | Sec. 3: Regulations to be prepared by Surgeon General with approval of the Secretary of the Treasury for the administration of the home.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Do.                                                    |
|                                                                       | Sec. 4: Secretary of the Treasury to erect suitable buildings.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                        |
|                                                                       | Sec. 5: Officer of Public Health Service detailed for duty at the home shall receive additional pay of $\frac{1}{2}$ of the pay of his grade.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 209 (g).                                               |
| Sec. 16, ch. 29, 39 Stat. 874, 885. ....                              | Sec. 6: Appropriation. ....<br>The part which requires medical officers of Public Health Service examining arriving aliens to have had 2 years' experience in practice since receiving degree of doctor of medicine.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                        |
| Ch. 3, 40 Stat. 2, 6. ....                                            | Sixth paragraph under head "Public Health Service": Provides that cost of fumigation and disinfection shall be charged to vessels from foreign ports at rates to be fixed by Secretary of the Treasury.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                        |
| Ch. 27, 40 Stat. 105, 146. ....                                       | Seventh paragraph under head "Bureau of Mines": Secretary of the Treasury authorized to detail medical officers of Service for cooperative health, safety, or sanitation work with the Bureau of Mines, with compensation and expenses payable by such Bureau.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 214 (a).                                               |
| Ch. 37, 40 Stat. 242. ....                                            | Authorizes officers of Public Health Service serving on Coast Guard vessels in time of war, or detailed in time of war for Army or Navy duty, to receive pensions for themselves and dependents corresponding to those of the respective services and makes them subject to the laws for the government of the service to which detailed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 214 (a) and (d).                                       |
| Ch. 113, 40 Stat. 634, 644. ....                                      | Proviso in fourth paragraph under head "Public Health Service": Provides for minimum pay of \$1,200 for attendants at marine hospitals, quarantine and immigration stations.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                        |
| Ch. 113, 40 Stat. 634, 644. ....                                      | Proviso in the eleventh paragraph under head "Public Health Service": Requires Public Health Service to pay St. Elizabeths Hospital the actual per capita cost of maintenance in the hospital of patients committed by the Service.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                        |
| Ch. 113, 40 Stat. 634, 694. ....                                      | Sixtieth paragraph under the head "Bureau of Fisheries" being the fourth full paragraph on page 694: Authorizes admission of officers and crews of vessels belonging to the Bureau of Fisheries to Public Health Service "benefits."                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 322 (a) (5).                                           |
| Secs. 1, 3, 4, 6, and 7 of ch. XV of ch. 143, 40 Stat. 845, 886. .... | Sec. 1: Creates an interdepartmental social hygiene board to recommend regulations for expenditure of money allotted to the States, to select the institutions, and fix the allotments of each, etc.<br>Sec. 3: Establishes in the Public Health Service a Division of Venereal Diseases to be under the charge of an assistant surgeon general.<br>Sec. 4: Prescribes the duties of the Division of Venereal Diseases to investigate the cause, treatment, and prevention of such diseases, to cooperate with State and local boards and to control, and prevent the spread of the diseases in interstate traffic.<br>Sec. 6: Authorizing appropriation for payments to State for use in prevention, control, and treatment of venereal diseases with method of allotment specified; and appropriation for payments to universities, colleges, and other institutions for scientific research and to develop more effective educational methods in the prevention of such diseases.<br>Sec. 7: Appropriations for the maintenance of Division of Venereal Diseases and for the interdepartmental social hygiene board. | 314 (a).                                               |
| Ch. 178, 40 Stat. 973, 992. ....                                      | Thirteenth paragraph (second full paragraph on p. 992) under the head "General expenses, Bureau of Chemistry": Authorizes the Secretary of the Treasury to detail medical officers of the Public Health Service to the Department of Agriculture for administration of the Food and Drugs Act of June 30, 1906, as amended.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 314 (c)-(f); 301 (d).                                  |
|                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 214 (a).                                               |



| Citations of provisions to be repealed                                                                      | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Sections of H. R. 4624 dealing with the subject matter |
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| Sec. 2, ch. 179, 40 Stat. 1008.....                                                                         | Authorizes and directs the Secretaries of War, Navy, and the Treasury to utilize the personnel and facilities of the Public Health Service and the Army and Navy Medical Departments to combat Spanish influenza and other communicable diseases.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                        |
| Ch. 196, 40 Stat. 1017.....                                                                                 | Creating a reserve in the Public Health Service with officers to be appointed by the President for a term of 5 years. Rank of officers shall not exceed Assistant Surgeon General. Officers shall be subject to call to active duty by the Surgeon General, and when on such active duty shall receive the same pay and allowances as officers in the regular commissioned Medical Corps.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 203; 208 (a); (2), 209 (b).                            |
| Ch. 98, 40 Stat. 1302.....                                                                                  | <p>Sec. 1: Authorizes the Secretary of the Treasury to provide additional hospital facilities for discharged, sick, and disabled soldiers, sailors, and marines; Army and Navy nurses; patients of the War Risk Insurance Bureau; merchant marine seamen; seamen on boats of the Mississippi River Commission; officers and enlisted men of the Coast Guard; officers and employees of the Public Health Service; certain keepers and assistant keepers of the Lighthouse Service; seamen of the Engineers Corps of the United States Army; officers and enlisted men of the Coast and Geodetic Survey; civilian employees entitled to treatment under the Employees' Compensation Act; and employees on Army transports entitled by law to treatment by the Public Health Service.</p> <p>Sec. 2: Transfers certain properties to the Treasury Department for the use of the Public Health Service for hospitals.</p> <p>Sec. 3: Directs the Secretary of War to transfer to the Secretary of the Treasury for the use of the Public Health Service equipment and supplies not required by the War Department for use in Public Health Service hospitals.</p> <p>Sec. 4: Makes available sanatorium at Hot Springs, S. Dak., for use by the Public Health Service for 5 years.</p> <p>Sec. 5: Authorizes the Secretary of the Treasury to contract with any existing hospital for the use of its facilities for 1,000 patients.</p> <p>Sec. 6: Authorizes the Secretary of the Treasury to purchase a hospital at Corpus Christi, Tex., for the emergency use of the Public Health Service.</p> <p>Sec. 7: Authorizes construction of new hospitals, roads, and equipment.</p> <p>Sec. 8: Provides that all new construction under this act shall be of fire-resisting character.</p> <p>Sec. 9: Appropriation of funds.</p> <p>Sec. 10: Authorizes the Secretary of the Treasury to employ additional technical and clerical services without regard to the civil-service laws in connection with this construction.</p> <p>Sec. 11: Appropriation for personnel of the Public Health Service.</p> | 322 (a); 324; 326 (a); 327.                            |
| Ch. 6, 41 Stat. 35, 45.....                                                                                 | Last paragraph under the head "Public Health Service": Appropriates money to be held as an emergency fund for the purchase of land and erection of building for hospitals of the Public Health Service.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                        |
| Ch. 94, 41 Stat. 503, 507.....                                                                              | Proviso at end of the first paragraph under the head "Public Health Service": Authorizes the Secretary of the Treasury to make regulations for the disposal of articles produced by patients in the Public Health Service hospitals.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 321 (c).                                               |
| Do.....                                                                                                     | The second paragraph under the head "Public Health Service": Authorizes officers of the Public Health Service to purchase quartermasters supplies from the Army, Navy, and Marine Corps at the same price charged officers of those services.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 209 (c).                                               |
| Ch. 94, 41 Stat. 503, 508, and a substantially similar provision appearing in ch. 161, 41 Stat. 1367, 1378. | The last paragraph under the head "Public Health Service": Provides that appropriations for the Public Health Service shall not be spent for advertising in periodicals for any other purpose than the procurement of bids for necessary services, supplies, materials, and equipment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                        |

| Citations of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                                          | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                               | Sections of H. R. 4624 dealing with the subject matter |
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| Ch. 235, 41 Stat. 874, 875.....                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Fourth paragraph under the head "Quarantine stations": Provides that the schedule of fees and rates at the New York quarantine station at the time of the transfer of title to the United States shall be adopted by the Secretary of the Treasury as the schedule for the operation of the station under the jurisdiction of the United States.          |                                                        |
| Ch. 235, 41 Stat. 874, 883.....                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Third paragraph under the head "Public Health Service": The Secretary of the Treasury is authorized to permit officers of the Public Health Service to make allotments from their pay.                                                                                                                                                                    | 209 (c).                                               |
| Ch. 80, 41 Stat. 1149.....                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Provides that any vessel at foreign port clearing for any port or place in United States must obtain bill of health from the consular officer at the port of departure. Fees to be charged in accordance with regulations.                                                                                                                                | 366 (a).                                               |
| Ch. 23, 42 Stat. 29, 38.....                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Directs the Secretary of the Treasury to issue a schedule of fees to be charged vessels at national quarantine stations.                                                                                                                                                                                                                                  |                                                        |
| Ch. 57, 42 Stat. 147, 148.....                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Proviso at end of sec. 4: Provides that commissioned personnel of the Public Health Service detailed to the Veterans' Bureau shall hold the same rank and grade and receive the same pay and allowances as may be provided by law for commissioned personnel performing similar duties in the Public Health Service.                                      |                                                        |
| Ch. 199, 42 Stat. 552, 558, and substantially similar provisions in the following statutes: Ch. 42, 42 Stat. 1174, 1210; ch. 264, 43 Stat. 390, 422; ch. 462, 43 Stat. 1141, 1175.                                                                                                                                                                                                                                                                                              | Ninth paragraph under head "Bureau of Mines": Authorizes the Secretary of the Treasury to detail medical officers of the Public Health Service for cooperative health, safety, or sanitation work with the Bureau of Mines.                                                                                                                               | 214 (a).                                               |
| Ch. 258, 42 Stat. 767, 776.....                                                                                                                                                                                                                                                                                                                                                                                                                                                 | The last sentence of the paragraph under the head "Public Health Service": Provides that the Immigration Service shall reimburse the Public Health Service, on the basis of per capita rates fixed by the Secretary of the Treasury, for care of Immigration Service's patients.                                                                          | 502.                                                   |
| Ch. 84, 43 Stat. 64, 75, and substantially similar provisions under the head "Public Health Service" in the following statutes: Ch. 87, 43 Stat. 763, 775; ch. 43, 44 Stat. 136, 147; ch. 126, 45 Stat. 162, 174; ch. 39, 45 Stat. 1028, 1039; ch. 289, 46 Stat. 335, 347; ch. 110, 49 Stat. 218, 229; ch. 725, 49 Stat. 1827, 1839; ch. 180, 50 Stat. 137, 149; ch. 55, 52 Stat. 120, 133; ch. 428, 54 Stat. 574, 585; ch. 269, 55 Stat. 466, 481; ch. 475, 56 Stat. 562, 581. | First proviso at the end of the ninth paragraph under the head "Public Health Service": Provides that the Immigration Service shall permit the Public Health Service to use the hospitals at the Ellis Island Immigration Station free of expense for physical upkeep, but with a charge of actual cost for fuel, light, water, etc.                      | Do.                                                    |
| Ch. 146, 43 Stat. 809.....                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Provides that the quarantine laws and regulations shall not apply to vessels operating exclusively between foreign ports near the northern frontier of the United States and ports in the United States. Authorizes Secretary of the Treasury to make regulations governing these vessels when it is expedient for the preservation of the public health. | 366 (d).                                               |
| Sec. 7 (b), ch. 344, 44 Stat. 568, 572.                                                                                                                                                                                                                                                                                                                                                                                                                                         | The words "and public health" in the last sentence: Authorizes the Secretary of the Treasury to provide by regulation for the application to civil air navigation of public-health laws to the extent he deems necessary.                                                                                                                                 | 367.                                                   |
| Sec. 11 (b), ch. 344, 44 Stat. 568, 574.                                                                                                                                                                                                                                                                                                                                                                                                                                        | The words "or public health" wherever they appear in the second sentence: Provides penalty of \$500 for violation of public-health regulations made under Air Commerce Act of 1926.                                                                                                                                                                       | Do.                                                    |
| Sec. 3, ch. 371, 44 Stat. 622, 626..                                                                                                                                                                                                                                                                                                                                                                                                                                            | Subsection (a) provides that officers and employees of the Lighthouse Service who are entitled to the benefits of the Public Health Service may obtain them at other than hospitals or stations of the Service under regulations issued by the Secretaries of the Treasury and of Commerce.                                                               | 326 (a).                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Subsection (b) authorizes the Public Health Service to provide medical, surgical, and hospital service for the officers and crews of vessels of the Lighthouse Service, including detail of officers on the vessels.                                                                                                                                      | Do.                                                    |

| Citations of provisions to be repealed                                                                                                                                                                                                                                                                            | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                       | Sections of H. R. 4624 dealing with the subject matter |
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| Ch. 625, 45 Stat. 603.....                                                                                                                                                                                                                                                                                        | Provides that retired officers and retired enlisted men of the Coast Guard shall be entitled to treatment at marine hospitals and out-patient offices of the Public Health Service.                                                                                                                                               | 326 (a).                                               |
| Ch. 39, 45 Stat. 1028, 1039, and substantially similar provisions appear under the head "Public Health Service" in the following statutes: Ch. 289, 46 Stat. 335, 346; ch. 110, 49 Stat. 218, 228; ch. 180, 50 Stat. 137, 148; ch. 55, 52 Stat. 120, 132; ch. 428, 54 Stat. 574, 584; ch. 269, 55 Stat. 466, 480. | Provide at end of fifth paragraph under the head "Public Health Service": Provides that funds of Public Health Service expendable for transportation or travelling expenses may also be used for the purpose of preparation for shipment and transportation to their former homes of remains of officers who die in line of duty. | 506.                                                   |
| Ch. 82, 45 Stat. 1085.....                                                                                                                                                                                                                                                                                        | Sec. 1: Definition of "habit-forming narcotic drug" and "addict."                                                                                                                                                                                                                                                                 | 2 (j) and (k).                                         |
|                                                                                                                                                                                                                                                                                                                   | Sec. 2: Attorney General and Secretaries of the Treasury and War are directed to select sites for two institutions for the treatment of addicts convicted of offenses against the United States and for the treatment of voluntary patients.                                                                                      | 341.                                                   |
|                                                                                                                                                                                                                                                                                                                   | Sec. 3: Secretary of the Treasury to submit estimates of the cost of the sites and the maintenance of the narcotic farms.                                                                                                                                                                                                         | Do.                                                    |
|                                                                                                                                                                                                                                                                                                                   | Sec. 4: Secretary of the Treasury authorized to have plans drawn in the Office of the Supervising Architect, Treasury Department.                                                                                                                                                                                                 | 302 (b).                                               |
|                                                                                                                                                                                                                                                                                                                   | Sec. 5: Management of the narcotic farms to be vested in the Secretary of the Treasury. A narcotics division to be created in the Office of the Surgeon General.                                                                                                                                                                  | 343 (a).                                               |
|                                                                                                                                                                                                                                                                                                                   | Sec. 6: Secretary of the Treasury authorized to issue regulations for the narcotic farms. Surgeon General to give State representatives the benefit of his experience in the administration of these farms.                                                                                                                       | 302 (b).                                               |
|                                                                                                                                                                                                                                                                                                                   | Sec. 7: Transfer of addicts from other penal institutions authorized.                                                                                                                                                                                                                                                             | 343 (a).                                               |
|                                                                                                                                                                                                                                                                                                                   | Sec. 8: Prosecuting officer directed to report to authority having the power to designate the place of confinement the name of convicted person whom he believes to be an addict.                                                                                                                                                 | 342.                                                   |
|                                                                                                                                                                                                                                                                                                                   | Sec. 9: Secretary of the Treasury authorized to establish plants, factories, or shops for the employment of the inmates.                                                                                                                                                                                                          | 343 (b).                                               |
|                                                                                                                                                                                                                                                                                                                   | Sec. 10: Narcotic addict not eligible for parole or commutation allowances while an addict.                                                                                                                                                                                                                                       | 343 (c).                                               |
|                                                                                                                                                                                                                                                                                                                   | Sec. 11: Provision for examination of addict prior to the expiration of his sentence and application by addict for further treatment.                                                                                                                                                                                             | 344.                                                   |
|                                                                                                                                                                                                                                                                                                                   | Sec. 12: Admission of voluntary patients to narcotic farms.                                                                                                                                                                                                                                                                       | 343 (d) and (e).                                       |
|                                                                                                                                                                                                                                                                                                                   | Sec. 13: Prisoner released from narcotic farm to be furnished with gratuities and transportation authorized for prisoners in other institutions. Prisoners may be placed on probation on condition that they submit to treatment at narcotic farm.                                                                                | 345 (a).                                               |
|                                                                                                                                                                                                                                                                                                                   | Sec. 14: Illegal introduction of habit-forming drugs into institution is a felony.                                                                                                                                                                                                                                                | 345 (b).                                               |
|                                                                                                                                                                                                                                                                                                                   | Sec. 15: Unlawful to attempt escape from narcotic farm; punishable by imprisonment for not to exceed 5 years.                                                                                                                                                                                                                     | 345 (c).                                               |
|                                                                                                                                                                                                                                                                                                                   | Sec. 16: Assisting escape from narcotic farm punishable by imprisonment for not to exceed 3 years.                                                                                                                                                                                                                                | 343 (a).                                               |
| Ch. 707, 45 Stat. 1623, 1644.....                                                                                                                                                                                                                                                                                 | Sec. 17: Alien addict entitled to discharge but subject to deportation, may be deported on discharge.                                                                                                                                                                                                                             | 214 (a).                                               |
|                                                                                                                                                                                                                                                                                                                   | Second paragraph under head "Government in the Territories": Secretary of the Treasury authorized to detail a medical officer of the Public Health Service to the hospital for the insane in Alaska.                                                                                                                              | 501.                                                   |
| Ch. 70, 46 Stat. 81.....                                                                                                                                                                                                                                                                                          | Part which permits erection of buildings donated to promote welfare of patients and personnel of the Service.                                                                                                                                                                                                                     | 214 (a).                                               |
| Ch. 125, 46 Stat. 150.....                                                                                                                                                                                                                                                                                        | Sec. 1: Secretary of the Treasury is authorized upon the request of the head of an executive department or independent establishment carrying on public health activities to detail officers or employees to cooperate in such work.                                                                                              | 214 (c).                                               |
|                                                                                                                                                                                                                                                                                                                   | Sec. 2: Surgeon General is authorized to detail personnel to educational and research institutions for special studies relating to public health. Secretary of the Treasury authorized to establish additional divisions in the Hygienic Laboratory to provide facilities for coordination of research.                           |                                                        |

| Citations of provisions to be repealed | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Sections of H. R. 4624 dealing with the subject matter                                                                                                                                                                            |
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| Ch. 125, 46 Stat. 150.....             | <p>Sec. 3: The administrative office and bureau divisions of the Public Health Service to be administered as a part of the departmental organization, and scientific offices and research laboratories to be administered as part of the field service.</p> <p>Sec. 4: Medical, dental, sanitary engineer, and pharmacist officers to be appointed by the President with the consent of the Senate. Original appointments to be made only in the grade corresponding to that of assistant surgeon or passed assistant surgeon except as provided in sections 5 and 6.</p> <p>Sec. 5: President is authorized to appoint with the consent of the Senate to grades in the regular corps not above that of medical director up to 55 medical, dental, sanitary engineer, and pharmacist officers. Not more than four appointments shall be made to a grade above that of surgeon.</p> <p>Sec. 6: Secretary of the Treasury authorized to order officers in the reserve of the Public Health Service to active duty for the purpose of training and determining their fitness for appointment in the regular corps. Such active duty shall be credited for purposes of future promotions in the regular corps.</p> <p>Sec. 7: When commissioned officers of the Public Health Service are not available, the President is authorized to appoint with the consent of the Senate not to exceed 3 persons in any 1 fiscal year to grades in the regular corps above that of assistant surgeon but not to a grade above that of medical director.</p> <p>Sec. 8: Persons commissioned in the regular corps at an age over 45 years shall, when placed on waiting orders for disability incurred in line of duty, receive pay at the rate of 4 percent of active pay for each complete year of service, the total not to exceed 75 percent.</p> <p>Sec. 9: Commissioned officers in the regular corps shall after examination be promoted according to the length of service and receive the same pay and allowances authorized for officers of corresponding grades of the Medical Corps of the Army. An officer whose original appointment is in a grade above that of assistant surgeon shall be considered to have had on the date of appointment service equal to that of a junior officer of the grade to which appointed. If the actual service of such officer is greater, such actual service not to exceed 10 years for passed assistant surgeon and 14 years for a surgeon shall be credited for purposes of promotion.</p> <p>Pharmacists must have 5 years of service in the grade of passed assistant surgeon and shall not be promoted above the latter grade.</p> <p>Provisions for separation from the Service of officers found not qualified for promotion for reasons other than physical disability incurred in line of duty.</p> <p>Sec. 10: President authorized to prescribe titles of commissioned officers other than medical officers. Officers in the grade of Assistant Surgeon General shall be designated as medical directors.</p> <p>Surgeon General entitled to the same pay and allowances as the Surgeon General of the Army. Former Surgeon General to revert to the grade and number in the regular corps he would have occupied. Officer detailed as Chief of the Narcotics Division to be Assistant Surgeon General while serving.</p> <p>Sec. 11: Secretary of the Treasury to appoint in accordance with civil-service laws all officers and employees other than commissioned officers.</p> <p>Sec. 12: Officers of the Public Health Service disabled on account of sickness or injury incurred in line of duty shall be entitled to medical, surgical, and hospital services under regulations prescribed by the Secretary of the Treasury.</p> <p>Sec. 13: Name of Advisory Board of Hygienic Laboratory changed to National Advisory Health Council and terms of service and compensation established.</p> <p>Sec. 1: Name of Hygienic Laboratory changed to National Institute of Health. Secretary of the Treasury authorized to acquire sites and erect buildings for the Institute. Appropriation made.</p> | <p>202.</p> <p>203; 208 (a).</p> <p>203.</p> <p>208 (b).</p> <p>211 (c) (1); 606.</p> <p>210 (a).</p> <p>Do.</p> <p>210 (c).</p> <p>206 (b).</p> <p>206 (a); 204.</p> <p>208 (f).</p> <p>322 (a) (7).</p> <p>217 (a) and (b).</p> |
| Ch. 320, 46 Stat. 379.....             | <p>Sec. 1: Name of Hygienic Laboratory changed to National Institute of Health. Secretary of the Treasury authorized to acquire sites and erect buildings for the Institute. Appropriation made.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                   |



| Citations of provisions to be repealed  | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                     | Sections of H. R. 4624 dealing with the subject matter |
|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| Ch. 320, 46 Stat. 379.....              | Sec. 2: Secretary of the Treasury authorized to accept gifts made unconditionally for research in programs of the diseases of man. Conditional gifts accepted if recommended by the Surgeon General and the National Advisory Health Council. Gifts to be held in trust and to be invested by the Secretary of the Treasury. Memorials to donors of \$500,000 or over. Surgeon General authorized to establish fellowships in the National Institute of Health. | 501; 301 (c).                                          |
|                                         | Sec. 3: Authorizes appointment of individual scientists other than commissioned officers for duty under fellowships in the National Institute of Health.                                                                                                                                                                                                                                                                                                        | 208 (d).                                               |
|                                         | Sec. 4: Secretary of the Treasury authorized to designate titles and fix compensation of scientific personnel, to fix the compensation of clerical assistants under the civil-service laws and to make expenditures for administration.                                                                                                                                                                                                                         | 208 (f).                                               |
|                                         | Sec. 5: Facilities of Institute shall be made available to local health authorities.                                                                                                                                                                                                                                                                                                                                                                            | 301 (b).                                               |
|                                         | Sec. 6: Director of National Institute of Health to have the pay and allowances of a medical director of the Public Health Service.                                                                                                                                                                                                                                                                                                                             | 205 (h); 206 (a).                                      |
| Sec. 4, ch. 488, 46 Stat. 585.....      | Changes name of Narcotics Division to Division of Mental Hygiene and transfers functions. Requires study of use and misuse of narcotic drugs and report to Commissioner of Narcotics.                                                                                                                                                                                                                                                                           | 302 (a).                                               |
| Ch. 597, 46 Stat. 807.....              | Provides that hospital facilities of the Public Health Service shall be available to lightkeepers and assistant lightkeepers and officers and crew of vessels of the Lighthouse Service.                                                                                                                                                                                                                                                                        | 326 (a).                                               |
| Ch. 409, 46 Stat. 1491.....             | Sec. 1: Provides that original bills of health shall be presented to the collector of customs and duplicate copies presented to the quarantine officer.                                                                                                                                                                                                                                                                                                         | 366 (b).                                               |
|                                         | Secretary of the Treasury authorized to establish by regulation the hours during which quarantine service shall be performed.                                                                                                                                                                                                                                                                                                                                   | 364 (b).                                               |
|                                         | Provides that certificate of health shall be procurable at any time quarantine services are performed at the station.                                                                                                                                                                                                                                                                                                                                           |                                                        |
|                                         | Secretary of the Treasury directed to prescribe a schedule of charges for quarantine services. Charges to be paid to the collector of customs by the vessel prior to departure.                                                                                                                                                                                                                                                                                 |                                                        |
|                                         | Officer or employee of the Public Health Service on duty at national quarantine station or on national quarantine vessel or detailed for duty in foreign ports, suffering from sickness or injury incurred in line of duty shall be a beneficiary of the Public Health Service.                                                                                                                                                                                 | 322 (a) (7).                                           |
|                                         | Sec. 2: Appropriation.                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                        |
|                                         | Sec. 3: Secretary of the Treasury authorized to receive advance of funds from steamship companies desiring extended quarantine service at any port.                                                                                                                                                                                                                                                                                                             |                                                        |
| Ch. 656, 48 Stat. 1116.....             | The words "public health" in the last sentence: Provides that any person violating customs or public health regulations under sec. 7 (h) of the Air Commerce Act of 1926 shall be subject to a civil penalty of \$500 and any aircraft used in connection with such violation shall be subject to forfeiture.                                                                                                                                                   | 367; 368.                                              |
| Ch. 110, 49 Stat. 218.....              | Ninth paragraph (second full paragraph on p. 229) under head "Public Health Service": Provides that all collections of the Public Health Service for the care and treatment of foreign seamen or other private pay patients shall be covered in the Treasury as miscellaneous receipts.                                                                                                                                                                         | 503.                                                   |
| Title VI of ch. 531, 49 Stat. 620, 634. | Sec. 601: Appropriation for the purpose of assisting States and subdivisions in maintaining adequate public health services.                                                                                                                                                                                                                                                                                                                                    | 314 (b).                                               |
|                                         | Sec. 602: Provides for allotment to the States by Surgeon General with the approval of the Secretary of the Treasury.                                                                                                                                                                                                                                                                                                                                           | 314 (c).                                               |
|                                         | Allotment to any State remaining unpaid at the end of the fiscal year shall be available for allotment to States for succeeding fiscal year.                                                                                                                                                                                                                                                                                                                    |                                                        |
|                                         | Surgeon General with the approval of the Secretary of the Treasury to determine after conference with the State health authorities the amount to be paid each State from the allotment. Secretary of the Treasury to pay in accordance with Surgeon General's certification.                                                                                                                                                                                    | 314 (c) and (d).                                       |

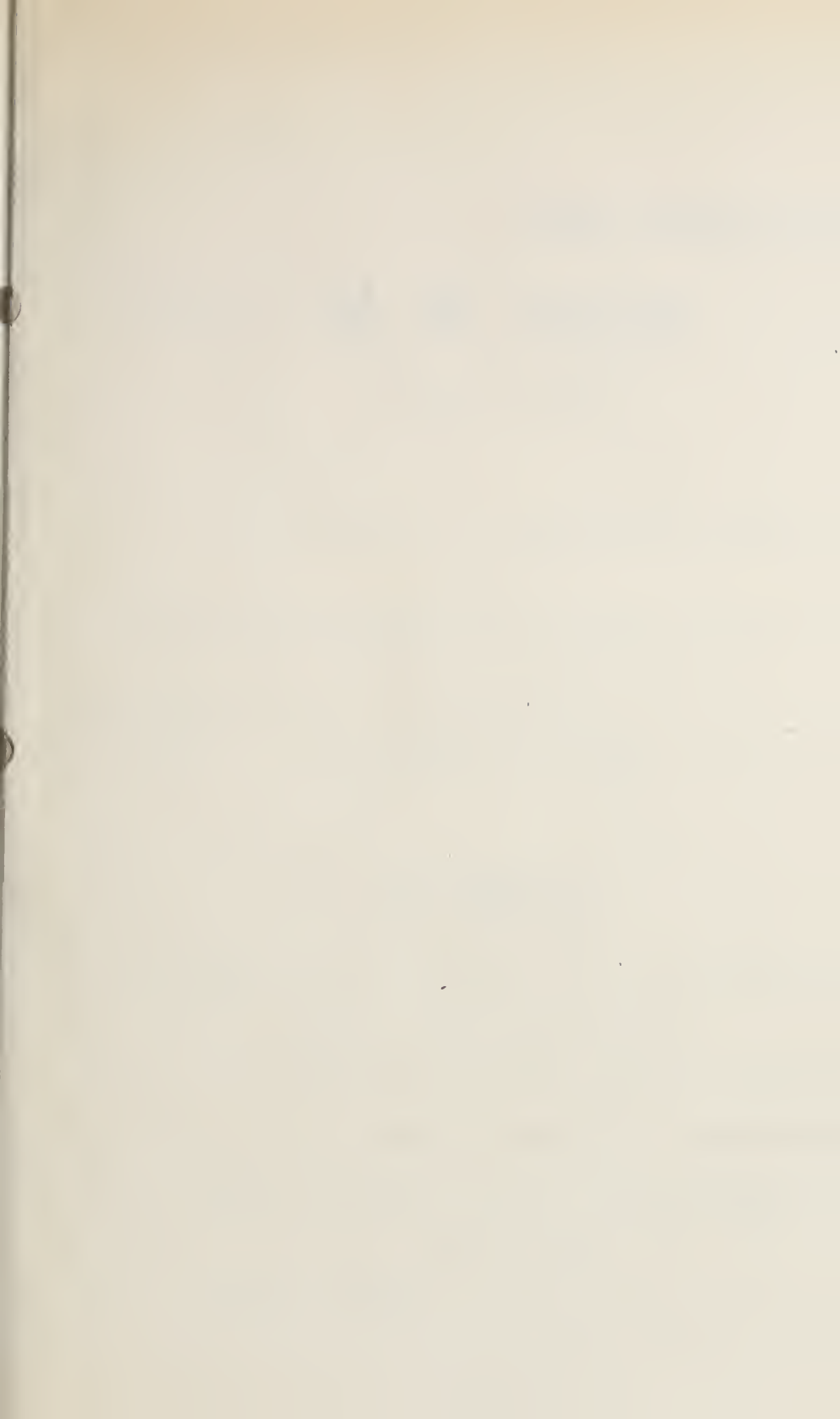
| Citations of provisions to be repealed  | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Sections of H. R. 4624 dealing with the subject matter |
|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| Title VI of ch. 531, 49 Stat. 620, 634. | Provides that moneys paid to the State shall be expended solely in carrying out the purposes of this act and in accordance with plans approved by the Surgeon General.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 314 (e).                                               |
|                                         | Sec. 603: Appropriation for expenditure by Public Health Service for investigation of diseases and problems of sanitation, including printing and binding of findings of investigations, and for pay and allowances and traveling expenses of personnel of the Public Health Service.                                                                                                                                                                                                                                                                                                                                                                            | 314 (b).                                               |
|                                         | Personnel of Public Health Service paid from any appropriation not made pursuant to this section may be detailed to assist in carrying out purposes of the title. Appropriation from which they are paid to be reimbursed from appropriation made pursuant to above while so detailed.                                                                                                                                                                                                                                                                                                                                                                           |                                                        |
|                                         | Secretary of the Treasury to include in his annual report to Congress account of administration of this title.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 511.                                                   |
| Ch. 161, 49 Stat. 1185.                 | Seamen not enlisted or commissioned in the Maritime or Naval Establishments shall, when employed on vessels of the United States Government (other than those of the Panama Canal) of more than 5 tons burden, or on State school ships, be entitled to medical relief. Cadets on State school ships entitled to same relief.                                                                                                                                                                                                                                                                                                                                    | 322 (a) (3) and (4).                                   |
| Ch. 550, 49 Stat. 1514.                 | Phrase "or of the United States Public Health Service": Authorizes the Secretary of the Treasury to determine any claim for damage occasioned by operation of vessels of the Coast Guard or Public Health Service not exceeding \$3,000 in any one case. Claim to be certified to Congress as a legal claim for payment out of appropriations made therefor.                                                                                                                                                                                                                                                                                                     | 505.                                                   |
| Ch. 725, 49 Stat. 1827, 1840.           | Proviso at end of thirteenth paragraph (fifth full paragraph on p. 1840) under head "Public Health Service": Changes name of narcotic farm at Lexington, Ky., to United States Public Health Service Hospital, Lexington, Ky.                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                        |
| Ch. 180, 50 Stat. 137, 143.             | Permits Secretary of Treasury to pay field employees of the Public Health Service, except those on a per diem or fee basis, who render part-time duty and are subject to call for other services at any time, annual salary for the part-time duty plus other fees prescribed by him for the other services.                                                                                                                                                                                                                                                                                                                                                     | 209 (f).                                               |
| Sec. 2 of ch. 545, 50 Stat. 547, 548.   | Provides that under regulations prescribed by the President, upon recommendation of the Surgeon General and with the approval of the Secretary of the Treasury, commissioned officers, chief warrant officers, warrant officers, cadets, and enlisted men of the Coast Guard shall be entitled to the benefits of the Public Health Service. Dependent members of families of officers and enlisted men shall be furnished medical services and out-patient treatment by the Public Health Service at certain stations, and hospitalization at marine hospitals at per diem cost equivalent to the uniform per diem reimbursement rate for Government hospitals. | 325 (a) (1) and (b).                                   |
| Ch. 565, 50 Stat. 559.                  | Sec. 1: Establishes National Cancer Institute in the Public Health Service.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 401.                                                   |
|                                         | Sec. 2: Surgeon General authorized to conduct and coordinate research, procure, use, and lend radium, provide training in technical matters relating to cancer, provide fellowships, secure consultation of cancer experts, and cooperate with State health agencies.                                                                                                                                                                                                                                                                                                                                                                                            | 402.                                                   |
|                                         | Sec. 3: Creates National Advisory Cancer Council and provides membership, terms of office and compensation.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 217 (c); 209 (e).                                      |
|                                         | Sec. 4: Council authorized to review research programs, collect information about cancer studies, review applications from hospitals or institutions for grants-in-aid, recommend to the Secretary of the Treasury acceptance of conditional gifts, and make recommendations to the Surgeon General with respect to carrying out this act.                                                                                                                                                                                                                                                                                                                       | 404; 403 (b).                                          |

| Citations of provisions to be repealed | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Sections of H. R. 4624 dealing with the subject matter                                                   |
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| Ch. 565, 50 Stat. 559.....             | <p>Sec. 5: Surgeon General authorized to purchase radium with the approval of the Secretary of the Treasury, to provide facilities for training and instruction relating to cancer diagnosis and treatment, establish and maintain with the approval of the Secretary of the Treasury research fellowships, secure assistance of experts, make grants-in-aid for research projects and, upon recommendation of the Council and with the approval of the Secretary of the Treasury, adopt additional regulations deemed necessary by the Surgeon General to carry out this act.</p> <p>Sec. 6: Secretary of the Treasury authorized to accept unconditional gifts and, upon recommendation of the Surgeon General and Council, conditional gifts for aid in work on cancer. Gifts to be held in trust and invested by the Secretary of the Treasury in securities of the United States. Memorials for donors of \$500,000 or over.</p> <p>Sec. 7: Appropriation for buildings and facilities, etc. Annual appropriation for administrative purposes.</p> <p>Sec. 8: Authorizes appointment of commissioned officers necessary to carry out this act. Act not to be construed as limiting the functions of the Public Health Service or any other agency relating to the study of cancer.</p> <p>Surgeon General with the approval of the Secretary of the Treasury authorized to issue regulations. Surgeon General to make annual report to Congress of the administration of the act.</p> | <p>402; 403; 301 (d) and (g).</p> <p>403 (b); 404; 501.</p> <p>405.</p> <p>406.</p> <p>215 (b); 511.</p> |
| Ch. 55, 52 Stat. 120, 134.....         | First proviso under the paragraph headed "Division of Mental Hygiene": Changes name of United States Narcotic Farm, Fort Worth, Tex., to United States Public Health Service Hospital, of Fort Worth, Tex.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                          |
| Ch. 267, 52 Stat. 439.....             | <p>Appropriates money to assist States and subdivisions in controlling venereal diseases and for the pay, allowances, and traveling expenses of commissioned officers and other personnel assigned to carrying out the purposes of the act and for printing of material relating thereto.</p> <p>Surgeon General to determine amount to be allotted to the States for venereal-disease control and to certify the amounts to the Secretary of the Treasury. Amount of any allotment unpaid at the end of the fiscal year available for allotment to the States for the succeeding fiscal year.</p> <p>Surgeon General to determine the amount to be paid each State from its allotment and to certify this amount to the Secretary of the Treasury. Secretary of the Treasury to pay in accordance with certification. Amounts to be expended by the State in carrying out the purposes of this act and in accordance with State plans approved by the Surgeon General.</p> <p>Surgeon General, with the approval of the Secretary of the Treasury and after consultation with the State health officers, to issue regulations.</p>                                                                                                                                                                                                                                                                                                                                                        | <p>314 (a) and (i).</p> <p>314 (c).</p> <p>314 (d) and (e).</p> <p>314 (h).</p>                          |
| Ch. 92, 53 Stat. 620.....              | <p>Sec. 1: Secretary of the Treasury authorized, on the request of the Secretary of Commerce, to detail medical officers of the Public Health Service for duty on vessels of the Coast and Geodetic Survey.</p> <p>Sec. 2: Under regulations prescribed by the President, upon recommendation of the Surgeon General with the approval of the Secretaries of the Treasury and of Commerce, all commissioned officers, ships' officers, and members of the crews of vessels of the Coast and Geodetic Survey and all dependent members of their families shall be entitled to Public Health Service care and treatment.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <p>214 (a).</p> <p>326 (a) (2) and (b).</p>                                                              |
| Ch. 606, 53 Stat. 1266.....            | Establishes Office of Assistant to the Surgeon General who shall act as Surgeon General during the latter's absence or disability. He shall have the grade corresponding to that of brigadier general and be entitled to the same pay and allowances as a brigadier general in the Army.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 205 (a); 206 (a).                                                                                        |

| Citations of provisions to be repealed                                  | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Sections of H. R. 4624 dealing with the subject matter                                                                      |
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| Cb. 636, 53 Stat. 1338.....                                             | Authorizes members of the National Advisory Health Council not in the regular employment of the Government to receive compensation fixed by the Federal Security Administrator, but not in excess of \$25 per diem. Surgeon General authorized to utilize the services of such members in connection with conference matters for such periods as he may determine.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 217 (b); 209 (e).                                                                                                           |
| Sec. 509 of ch. 666, 53 Stat. 1360                                      | Appropriation to assist States and subdivisions in establishing and maintaining adequate public health services, including the training of personnel for State and local health work.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 314 (b).                                                                                                                    |
| Sec. 205 (b) of Reorganization Plan No. 1, 53 Stat. 1423, 1425.         | Transfers functions of the Secretary of the Treasury relating to the Public Health Service to the Federal Security Administrator, except those functions relating to the acceptance and investment of gifts authorized by secs. 23 (b) and 137 (e), title 42, U. S. C.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 201.                                                                                                                        |
| Cb. 566, 54 Stat. 747.....                                              | Deletes the words "adjacent thereto" from the fourth paragraph of sec. 2 of an act entitled "An act creating additional quarantine powers and imposing additional duties upon the marine hospital service" (U. S. C., 1934 ed., title 42, sec. 82).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                             |
| The First Deficiency Appropriation Act, 1943. Public Law 11, 78th Cong. | The fourth paragraph under the heading "Federal Security Agency, Public Health Service": Provides that during the war and 6 months thereafter regular commissioned officers may be appointed to higher temporary grades without vacating permanent appointment and that reserve officers may be distributed in the several grades without regard to the proportion which at any time obtains among commissioned officers of the Service.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 210 (a) (1).                                                                                                                |
| The Public Health Service Act of 1943, Public Law 184, 78th Cong.       | <p>Sec. 1: The Public Health Service is to consist of the Office of the Surgeon General, the National Institute of Health, the Bureau of Medical Services, and the Bureau of State Services. The Surgeon General, under the supervision of the Federal Security Administrator, is to assign the functions of the Service to that Office, Institute, and to the two Bureaus, and to establish units within them and abolish or reorganize units.</p> <p>Sec. 2: The officers assigned as the Director of the Institute and the chiefs of the bureaus and the Chief Medical Officer of the Coast Guard shall be Assistant Surgeons General while so assigned.</p> <p>Sec. 3: Not more than 6 of the commissioned officers in the regular corps assigned as heads of divisions shall have the grade and pay of a medical director. The Chiefs of the Dental and Sanitary Engineering Divisions shall have the grade and pay of Assistant Surgeons General.</p> <p>Sec. 4: In time of war or national emergency commissioned officers may be appointed to higher temporary grades without vacating permanent appointments and without the necessity of subscribing to a new oath of office if service after taking previous oaths of office has been continuous. Reserve officers may be distributed in the several grades without regard to the proportion which obtains among commissioned medical officers of the Service. During the war and 6 months thereafter graduates of reputable osteopathic colleges are eligible for appointment as reserve officers.</p> <p>Sec. 5: Records of regular commissioned officers originally appointed above grade of assistant surgeon to be reviewed under regulations approved by the President after first 3 years of service in such grade and commissioned officers found unqualified for further service are to be separated with 6 months pay and allowances.</p> <p>Sec. 6: Assistant Surgeons General to act as Surgeon General in the order of designation by him in case of absence or disability, or vacancy in the office, of both the Surgeon General and Assistant to the Surgeon General.</p> | <p>201, 202.</p> <p>205 (b); 206 (a).</p> <p>207 (h); 205 (b).</p> <p>210 (a) (1); 609.</p> <p>210 (b).</p> <p>205 (c).</p> |



| Citations of provisions to be repealed                            | Subject matter of provisions to be repealed                                                                                                                                                                                                                                                                                                             | Sections of H. R. 4624 dealing with the subject matter |
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| The Public Health Service Act of 1943, Public Law 134, 78th Cong. | Sec. 7: Act of Apr. 9, 1930, amended to authorize appointment of commissioned officers to a junior grade corresponding to a second lieutenant of the Medical Department of the Army with same pay and allowances. Examination of each such appointee authorized in accordance with regulations of the President with promotion or separation to follow. | 206 (a) (6); 208 (a) (1); 210 (a) (3).                 |
|                                                                   | Sec. 8: Subsection (a) (1) defines full military benefits to include most of the rights and benefits accorded on account of military or naval service.                                                                                                                                                                                                  | 212 (a) (1).                                           |
|                                                                   | Subsection (a) (2) defines limited military benefits as full military benefits without veterans' benefits and without eligibility under the National Service Life Insurance Act.                                                                                                                                                                        | 212 (a) (2).                                           |
|                                                                   | Subsection (b) provides that officers serving outside the United States or Alaska in time of war, and officers detailed for duty with the Army, Navy, or Coast Guard, shall be entitled to full military benefits and that in time of war all commissioned officers shall be entitled to limited military benefits.                                     | 212 (b).                                               |
|                                                                   | Subsection (c) authorizes the President to declare the commissioned corps a part of the military forces. In such event all commissioned officers entitled to full military benefits.                                                                                                                                                                    | 216; 212 (b).                                          |
|                                                                   | Sec. 9: Commissioned officers to be eligible for benefits of the United States Employees' Compensation Act of Sept. 7, 1916, as amended. Requires election between such benefits and any other benefits payable on account of the same injury or death.                                                                                                 | 605 (a) and (b).                                       |
|                                                                   | Sec. 10: Surviving beneficiaries of commissioned officers who died after Dec. 7, 1941, and before Nov. 11, 1943, on active duty in the Service, or while detailed to the Army, Navy, or Coast Guard, are to receive 6 months' pay, and the benefits provided under sec. 9 where not entitled to veterans' benefits.                                     | 605 (d).                                               |
|                                                                   | Sec. 11: Act to be cited as "Public Health Service Act of 1943." Transfer of funds authorized in case of reorganization under sec. 1.                                                                                                                                                                                                                   | 508.                                                   |





# Union Calendar No. 458

78TH CONGRESS  
2D SESSION

## H. R. 4624

[Report No. 1364]

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### IN THE HOUSE OF REPRESENTATIVES

APRIL 18, 1944

Mr. BULWINKLE introduced the following bill; which was referred to the Committee on Interstate and Foreign Commerce

APRIL 20, 1944

Committed to the Committee of the Whole House on the state of the Union and ordered to be printed

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## A BILL

To consolidate and revise the laws relating to the Public Health Service, and for other purposes.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       TITLE I—SHORT TITLE AND DEFINITIONS

4                               SHORT TITLE

5       SECTION 1. Titles I to V, inclusive, of this Act may be  
6       cited as the "Public Health Service Act".

7                               DEFINITIONS

8       SEC. 2. When used in this Act—

9       (a) The term "Service" means the Public Health  
10      Service;



1       (b) The term "Surgeon General" means the Surgeon  
2 General of the Public Health Service;

3       (c) The term "Administrator" means the Federal Se-  
4 curity Administrator;

5       (d) The term "regulations", except when otherwise  
6 specified, means rules and regulations made by the Surgeon  
7 General with the approval of the Administrator;

8       (e) The term "executive department" means any execu-  
9 tive department, agency, or independent establishment of  
10 the United States or any corporation wholly owned by the  
11 United States;

12       (f) The term "State" means a State or the District of  
13 Columbia, Hawaii, Alaska, Puerto Rico, or the Virgin  
14 Islands, except that as used in section 361 (d) such term  
15 means a State, the District of Columbia, or Alaska;

16       (g) The term "possession" includes, among other pos-  
17 sessions, Puerto Rico and the Virgin Islands;

18       (h) The term "seamen" includes any person employed  
19 on board primarily in the care, preservation, or navigation  
20 of any vessel, or in the service, on board, of those engaged  
21 in such care, preservation, or navigation;

22       (i) The term "vessel" includes every description of  
23 watercraft or other artificial contrivance used, or capable of  
24 being used, as a means of transportation on water, exclusive  
25 of aircraft and amphibious contrivances;

(j) The term "habit-forming narcotic drug" or "narcotic" means opium and coca leaves and the several alkaloids derived therefrom, the best known of these alkaloids being morphia, heroin, and codeine, obtained from opium, and cocaine derived from the coca plant; all compounds, salts, preparations, or other derivatives obtained either from the raw material or from the various alkaloids; Indian hemp and its various derivatives, compounds, and preparations, and peyote in its various forms; and

(k) The term "addict" means any person who habitually uses any habit-forming narcotic drug so as to endanger the public morals, health, safety, or welfare, or who is or has been so far addicted to the use of such habit-forming narcotic drugs as to have lost the power of self-control with reference to his addiction.

## TITLE II—ADMINISTRATION

### PUBLIC HEALTH SERVICE

SEC. 201. The Public Health Service in the Federal Security Agency shall be administered by the Surgeon General under the supervision and direction of the Administrator.

### ORGANIZATION

SEC. 202. The Service shall consist of (1) the Office of the Surgeon General, (2) the National Institute of Health, (3) the Bureau of Medical Services, and (4) the Bureau of State Services. The Surgeon General is authorized and di-

1 rected to assign to the Office of the Surgeon General, to  
2 the National Institute of Health, to the Bureau of Medical  
3 Services, and to the Bureau of State Services, respectively,  
4 the several functions of the Service, and to establish within  
5 them such divisions, sections, and other units as he may find  
6 necessary; and from time to time abolish, transfer, and con-  
7 solidate divisions, sections, and other units and assign their  
8 functions and personnel in such manner as he may find  
9 necessary for efficient operation of the Service. No division  
10 shall be established, abolished, or transferred, and no divisions  
11 shall be consolidated, except with the approval of the Admin-  
12 istrator. The National Institute of Health shall be adminis-  
13 tered as a part of the field service. The Surgeon General  
14 may delegate to any officer or employee of the Service such  
15 of his powers and duties under this Act, except the making  
16 of regulations, as he may deem necessary or expedient.

#### 17 COMMISSIONED CORPS

18 SEC. 203. There shall be in the Service a commissioned  
19 Regular Corps and, for the purpose of securing a reserve  
20 for duty in the Service in time of national emergency, a  
21 Reserve Corps. All commissioned officers shall be citizens  
22 and shall be appointed without regard to the civil-service  
23 laws and compensated without regard to the Classification  
24 Act of 1923, as amended. Commissioned officers of the  
25 Reserve Corps shall be appointed by the President and

1 commissioned officers of the Regular Corps shall be ap-  
2 pointed by him by and with the advice and consent of the  
3 Senate. Commissioned officers of the Reserve Corps shall  
4 at all times be subject to call to active duty by the Surgeon  
5 General, including active duty for the purpose of training  
6 and active duty for the purpose of determining their fitness  
7 for appointment in the Regular Corps. All active service  
8 in the Reserve Corps, as well as service in the Regular  
9 Corps, shall be credited for the purpose of promotion in the  
10 Regular Corps.

11 SURGEON GENERAL

12 SEC. 204. The Surgeon General shall be appointed  
13 from the Regular Corps for a four-year term by the Presi-  
14 dent by and with the advice and consent of the Senate.  
15 Upon the expiration of such term the Surgeon General,  
16 unless reappointed, shall revert to the grade and number in  
17 the Regular Corps that he would have occupied had he not  
18 served as Surgeon General.

19 DEPUTY SURGEON GENERAL AND ASSISTANT SURGEONS

20 GENERAL

21 SEC. 205. (a) The Surgeon General shall assign one  
22 commissioned officer from the Regular Corps to administer  
23 the Office of the Surgeon General, to act as Surgeon General  
24 during the absence or disability of the Surgeon General or  
25 in the event of a vacancy in that office, and to perform such



1 other duties as the Surgeon General may prescribe, and while  
2 so assigned he shall have the title of Deputy Surgeon General.

3 (b) The Surgeon General shall assign six commissioned  
4 officers from the Regular Corps to be, respectively, the  
5 Director of the National Institute of Health, the Chief of the  
6 Bureau of State Services, the Chief of the Bureau of Medical  
7 Services, the Chief Medical Officer of the United States  
8 Coast Guard, the Chief Dental Officer of the Service, and  
9 the Chief Sanitary Engineering Officer of the Service, and  
10 while so serving they shall each have the title of Assistant  
11 Surgeon General.

12 (c) The Surgeon General shall designate the Assistant  
13 Surgeon General who shall serve as Surgeon General in case  
14 of absence or disability, or vacancy in the offices, of both the  
15 Surgeon General and the Deputy Surgeon General.

# 16 GRADES, RANKS, AND TITLES OF THE COMMISSIONED CORPS

17 SEC. 206. (a) The Surgeon General, during the period  
18 of his appointment as such, shall be of the same grade, with  
19 the same pay and allowances, as the Surgeon General of the  
20 Army; and the Deputy Surgeon General and Assistant Sur-  
21 geons General, while assigned as such, shall have the grade  
22 corresponding with the grade of Brigadier General, with  
23 the same pay and allowances. The grades of commissioned  
24 officers of the Service shall correspond with grades of officers  
25 of the Army as follows:

- 1           (1) Officers of the director grade—colonel;
- 2           (2) Officers of the senior grade—lieutenant colonel;
- 3           (3) Officers of the full grade—major;
- 4           (4) Officers of the senior assistant grade—captain;
- 5           (5) Officers of the assistant grade—first lieutenant;
- 6           and
- 7           (6) Officers of the junior assistant grade—second
- 8           lieutenant.

9           (b) The titles of medical officers of the foregoing grades  
 10 shall be respectively (1) medical director, (2) senior sur-  
 11 geon, (3) surgeon, (4) senior assistant surgeon, (5)  
 12 assistant surgeon, and (6) junior assistant surgeon. The  
 13 President is authorized to prescribe titles, appropriate to the  
 14 several grades, for commissioned officers of the Service other  
 15 than medical officers. All titles of the officers of the Reserve  
 16 Corps shall have the suffix "Reserve".

#### 17                   SPECIAL TEMPORARY POSITIONS

18           SEC. 207. (a) When necessary for the accomplishment  
 19 of important temporary work in time of war, or of emergency  
 20 proclaimed by him, the President may establish special tem-  
 21 porary positions in the Service and prescribe grades which  
 22 shall be applicable to officers during periods they are as-  
 23 signed to such positions. While assigned to any such posi-  
 24 tion an officer shall receive the pay and allowances applicable  
 25 to the grade so prescribed. Not more than three such posi-

1 tions existing at any one time shall have the grade of  
2 Assistant Surgeon General. The Surgeon General shall  
3 assign commissioned officers to such positions.

4 (b) Commissioned officers and qualified technical or  
5 professional noncommissioned personnel may be assigned by  
6 the Surgeon General to be chiefs of administrative units.  
7 Such assignments shall not affect the pay of commissioned  
8 officers so assigned, except that when any commissioned  
9 officer below the grade of director is assigned to serve as  
10 chief of a division such officer during the period so assigned  
11 shall have the temporary grade and receive the pay and  
12 allowances applicable to the director grade.

13 APPOINTMENT OF PERSONNEL

14 SEC. 208. (a) (1) Except as provided in subsection  
15 (b) of this section, original appointments to the Regular  
16 Corps may be made only in the junior assistant, assistant,  
17 and senior assistant grades and original appointments to a  
18 grade above junior assistant shall be made only after passage  
19 of an examination, given in accordance with regulations of  
20 the President, in one or more of the several branches of  
21 medicine, surgery, dentistry, hygiene, sanitary engineering,  
22 pharmacy, or related scientific specialties in the field of public  
23 health.

24 (2) Original appointments to the Reserve Corps may  
25 be made to any grade up to and including the director grade



1 but only after passage of an examination given in accordance  
2 with regulations of the President. Reserve commissions shall  
3 be for a period of not more than five years and any such com-  
4 mission may be terminated by the President at any time,  
5 in his discretion.

6 (b) Whenever commissioned officers of the Service are  
7 not available for the performance of permanent duties re-  
8 quiring highly specialized training and experience in special  
9 fields related to public health, the Administrator on recom-  
10 mendation of the Surgeon General shall report that fact to  
11 the President and the President is authorized to appoint, by  
12 and with the advice and consent of the Senate, not to exceed  
13 three persons in any one fiscal year to grades in the Regular  
14 Corps of the Service above that of senior assistant, but not  
15 to a grade above that of director; and for purposes of pay and  
16 pay period any person appointed under the provisions of this  
17 section shall be considered as having had on the date of ap-  
18 pointment service equal to that of the junior officer of the  
19 grade to which appointed.

20 (c) In accordance with regulations, special consultants  
21 may be employed to assist and advise in the operations of the  
22 Service. Such consultants may be appointed without regard  
23 to the civil-service laws and their compensation may be fixed  
24 without regard to the Classification Act of 1923, as amended.

25 (d) In accordance with regulations, individual scientists,



1 other than commissioned officers of the Service, may be des-  
2 ignated by the Surgeon General to receive fellowships, ap-  
3 pointed for duty with the Service without regard to the  
4 civil-service laws and compensated without regard to the  
5 Classification Act of 1923, as amended, may hold their fel-  
6 lowships under conditions prescribed therein, and may be  
7 assigned for studies or investigations either in this country  
8 or abroad during the terms of their fellowships.

9 (e) Persons who are not citizens may be employed as  
10 consultants pursuant to subsection (c) and may be appointed  
11 to fellowships pursuant to subsection (d). Unless other-  
12 wise specifically provided, any prohibition in any other Act  
13 against the employment of aliens, or against the payment  
14 of compensation to them, shall not be applicable in the case  
15 of persons employed or appointed pursuant to such subsec-  
16 tions.

17 (f) The appointment of any officer or employee of the  
18 Service made in accordance with the civil-service laws shall  
19 be made by the Administrator, and may be made effective  
20 as of the date on which such officer or employee enters upon  
21 duty.

## 22 PAY AND ALLOWANCES

23 SEC. 209. (a) Commissioned officers of the Regular  
24 Corps shall receive such pay and allowances as are or may  
25 hereafter be provided by law.

1 (b) Reserve officers shall receive the same pay and  
2 allowances when on active duty as commissioned officers of  
3 the Regular Corps, including allowances for travel and trans-  
4 portation of household goods and effects.

5 (c) In accordance with regulations of the President,  
6 commissioned officers of the Regular Corps and officers of  
7 the Reserve on active duty may make allotments from their  
8 pay and may be granted leaves of absence without any de-  
9 duction from their pay. Such officers shall also be permitted  
10 to purchase quartermaster supplies from the Army, Navy,  
11 and Marine Corps at the same price as is charged officers  
12 of the Army, Navy, and Marine Corps.

13 (d) Female commissioned officers of the Service shall  
14 receive the same pay and allowances as male officers of  
15 corresponding grades, including allowances for dependents,  
16 except that no allowance shall be paid to any female com-  
17 missioned officer on account of any dependent who is not in  
18 fact dependent upon such officer for his or her chief sup-  
19 port. For the purposes of this subsection the term "depend-  
20 ent" shall include a husband, father, mother, and unmarried  
21 children (including stepchildren and adopted children)  
22 under twenty-one years of age.

23 (e) Members of the National Advisory Health Council  
24 and members of the National Advisory Cancer Council, other  
25 than ex officio members, while attending conferences or

1 meetings of their respective Councils or while otherwise serv-  
2 ing at the request of the Surgeon General, shall be entitled  
3 to receive compensation at a rate to be fixed by the Adminis-  
4 trator, but not exceeding \$25 per diem, and shall also be  
5 entitled to receive an allowance for actual and necessary  
6 traveling and subsistence expenses while so serving away  
7 from their places of residence.

8 (f) Field employees of the Service, except those em-  
9 ployed on a per diem or fee basis, who render part-time duty  
10 and are also subject to call at any time for services not  
11 contemplated in their regular part-time employment,  
12 may be paid annual compensation for such part-time duty  
13 and, in addition, such fees for such other services as the  
14 Surgeon General may determine; but in no case shall the  
15 total paid to any such employee for any fiscal year exceed  
16 the amount of the minimum annual salary rate of the classifi-  
17 cation grade of the employee.

18 (g) Whenever any commissioned or other officer or  
19 employee of the Service is assigned for duty which the  
20 Surgeon General finds requires intimate contact with persons  
21 afflicted with leprosy, he may receive, as provided by regula-  
22 tions of the President, in addition to the pay and any allow-  
23 ances of his grade, not more than one-half the pay of  
24 such grade, and such allowances or increased allowances  
25 as may be provided for by such regulations.

1 (h) Individuals appointed under section 208 (d) shall  
2 have included in their fellowships such stipends or allowances,  
3 including travel and subsistence expenses, as the Surgeon  
4 General may deem necessary to procure qualified fellows.

5 PROMOTIONS AND SEPARATION OF COMMISSIONED OFFICERS  
6 IN THE REGULAR CORPS

7 SEC. 210. (a) Promotions of commissioned officers of  
8 the Regular Corps to any grade up to and including the direc-  
9 tor grade shall be made only after examination given in  
10 accordance with regulations of the President and shall be  
11 made according to the same length of service as is now or may  
12 hereafter be prescribed for promotion of officers of correspond-  
13 ing grades of the Medical Corps of the Army, except that—

14 (1) In time of war, or of national emergency pro-  
15 claimed by the President, any commissioned officer of the  
16 Regular Corps may be appointed to a higher temporary  
17 grade with the pay and allowances thereof without  
18 examination and without vacating his permanent  
19 appointment, and, if his service shall have been con-  
20 tinuous, without renewing his oath of office;

21 (2) For purposes of promotion, an officer whose  
22 original appointment to the Regular Corps was above  
23 the assistant grade shall be considered as having had on  
24 the date of such original appointment service equal to  
25 that of the junior officer of the grade to which he was



1 appointed, except that if his active commissioned service  
2 in the Service exceeds that of the junior officer of the  
3 grade, such service (not exceeding ten years for an  
4 officer appointed in the senior assistant grade and four-  
5 teen years for an officer appointed in the full grade)  
6 shall be credited for purposes of promotion;

7 (3) Officers commissioned in the grade of junior  
8 assistant shall be examined for promotion after not more  
9 than two years of service and if qualified shall be pro-  
10 moted to the next higher grade; and

11 (4) Commissioned officers other than medical,  
12 dental, and sanitary engineering officers shall be pro-  
13 moted in accordance with regulations of the President.

14 (b) At the end of his first three years of service, the  
15 record of each commissioned officer in the Regular Corps  
16 originally appointed in or above the grade of senior assistant  
17 shall be reviewed in accordance with regulations of the  
18 President and if found not fully qualified for further service  
19 he shall be separated from the Service and paid six months'  
20 pay and allowances.

21 (c) When a commissioned officer in the Regular Corps  
22 is found, after examination, to be not qualified for promo-  
23 tion for reasons other than physical disability incurred in  
24 line of duty—

25 (1) If below the full grade he shall be separated

from the Service, and if in the assistant grade he shall be separated and paid six months' pay and allowances, and if in the senior assistant grade he shall be separated and paid one year's pay and allowances; and

(2) If in the full or senior grade he shall be reported as not in line of promotion, or shall be retired and paid at the rate of  $2\frac{1}{2}$  per centum for each complete year of active commissioned service in the Service, but in no case to exceed 60 per centum of his active pay at the time he is retired.

#### RETIREMENT OF COMMISSIONED OFFICERS

SEC. 211. (a) A commissioned officer of the Regular Corps retired for disability from disease or injury incurred in line of duty, or a commissioned officer of the Reserve Corps retired for disability from disease or injury incurred in line of duty in time of war, shall be entitled, except as provided in subsection (c), to receive retired pay at the rate of 75 per centum of his active pay at the time of retirement.

(b) A commissioned officer shall be retired on the first day of the month following his sixty-fourth birthday. If he is an officer in the Regular Corps, he shall, except as provided in subsection (c), be entitled to receive retired pay at the rate of 75 per centum of his active pay at the time of retirement.

1       (c) (1) Any commissioned officer of the Regular  
2 Corps who at the time of his original appointment was more  
3 than forty-five years of age shall upon retirement, unless  
4 retired for disability from disease or injury incurred in time  
5 of war, be entitled to retired pay only at the rate of 4 per  
6 centum of his active pay at the time of retirement for each  
7 twelve months of active commissioned service, including  
8 any such service in the Army, Navy, or Coast Guard, but  
9 in no case more than 75 per centum of such active pay.

10       (2) The retired pay of any commissioned officer who  
11 has served four years or more as Surgeon General or Deputy  
12 Surgeon General shall be based on the pay of the highest  
13 grade held by him as such Surgeon General or Deputy  
14 Surgeon General.

15       (3) The retired pay of an officer of the Regular Corps  
16 who has failed, by reason of disability incurred in line of duty,  
17 to receive a promotion to which he would otherwise have  
18 been entitled, shall be based on the pay of the grade to which,  
19 but for such disability, he would have been promoted.

20       (d) An officer retired for disability who is found to have  
21 recovered from his disability, and in time of war an officer  
22 who has been retired for age, may in accordance with regula-  
23 tions of the President be recalled to active duty.

24       (e) With the approval of the President a commissioned  
25 officer who has served four years or more as Surgeon General

1 and who has had not less than twenty-five years of active  
2 commissioned service in the Service may retire voluntarily,  
3 either at the termination of his term as Surgeon General or  
4 at any time thereafter; and his retired pay shall be at the  
5 rate of 75 per centum of the pay of the highest grade held  
6 by him as such Surgeon General.

7 (f) Commissioned officers of the Reserve Corps, while on  
8 active duty, shall be deemed to be officers of the executive  
9 branch of the Government within the meaning of section 3  
10 of the Civil Service Retirement Act, as amended (U. S. C.,  
11 1940 edition, title 5, section 693).

#### 12 MILITARY BENEFITS

13 SEC. 212. (a) For the purposes of this section—

14 (1) the term “full military benefits” means all  
15 rights, privileges, immunities, and benefits provided  
16 under any law of the United States in the case of  
17 commissioned officers of the Army (including their sur-  
18 viving beneficiaries) on account of active military  
19 service, including, but not limited to, burial payments  
20 in the event of death, six months’ pay in case of death,  
21 veterans’ compensation and pensions and other veterans’  
22 benefits, the rights provided under the Soldiers’ and  
23 Sailors’ Civil Relief Act, as amended, and under the  
24 National Service Life Insurance Act, as amended, travel



1 allowances, including per diem allowances for travel  
2 without regard to repeated travel between two or more  
3 places in the same vicinity, exemption from payment  
4 of postage on mail, exemption of certain pay  
5 from Federal income taxation, and other benefits,  
6 privileges and exceptions under the Internal Revenue  
7 laws; excluding, however, retired pay, uniform allow-  
8 ances, the right to be awarded military ribbons, medals,  
9 and decorations, and the benefits of the Mustering-out  
10 Payment Act of 1944, and excluding reemployment  
11 rights with respect to any commissioned officer of the  
12 Service except officers of the Reserve Corps called to  
13 active duty after November 11, 1943; and

14 (2) the term "limited military benefits" means  
15 full military benefits, except veterans' compensation and  
16 pensions and other veterans' benefits, and eligibility  
17 under the National Service Life Insurance Act, as  
18 amended.

19 (b) Commissioned officers of the Service (including  
20 their surviving beneficiaries) —

21 (1) shall be entitled to limited military benefits  
22 with respect to all active service in time of war;

23 (2) shall be entitled to full military benefits with  
24 respect to active service performed while detailed for  
25 duty with the Army, Navy, or Coast Guard;

(3) shall be entitled to full military benefits with respect to active service outside the continental limits of the United States, or in Alaska, in time of war;

(4) shall be entitled to full military benefits with respect to active service performed while the Service is part of the military forces of the United States pursuant to executive order of the President.

(c) The authority vested by law in the War Department, the Secretary of War, or other officers of the War Department with respect to rights, privileges, immunities, and benefits referred to in subsection (a) shall be exercised, with respect to commissioned officers of the Service, by the Surgeon General under the supervision and direction of the Administrator.

(d) The President may prescribe the conditions under which commissioned officers of the Service may be awarded military ribbons, medals, and decorations.

#### ALLOWANCES FOR UNIFORMS

SEC. 213. An allowance of \$250 for uniforms and equipment is authorized to be paid to each commissioned officer of the Service who is hereafter, in time of war, appointed to the Regular Corps or called to active duty in the Reserve Corps, or who is hereafter on active duty in either corps at the commencement of any war, if at such time the officer is in the grade of junior assistant, assistant, or senior assistant,

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6

21

1 (c) The Surgeon General may detail personnel of the  
2 Service to nonprofit educational, research, or other institu-  
3 tions engaged in health activities for special studies of scien-  
4 tific problems and for the dissemination of information  
5 relating to public health.

6 (d) Personnel detailed under subsections (b) and (c)  
7 shall be paid from applicable appropriations of the Service,  
8 except that, in accordance with regulations such personnel  
9 may be placed on leave without pay and paid by the State,  
10 subdivision, or institution to which they are detailed. The  
11 services of personnel while detailed pursuant to this section  
12 shall be considered as having been performed in the Service  
13 for purposes of longevity pay, promotion, retirement, com-  
14 pensation for injury or death, and the benefits provided by  
15 section 212.

16 REGULATIONS

17 SEC. 215. (a) The President shall from time to time  
18 prescribe regulations with respect to the appointment, pro-  
19 motion, retirement, termination of commission, titles, pay,  
20 uniforms, allowances (including increased allowances for  
21 foreign service), and discipline of the commissioned corps  
22 of the Service.

23 (b) The Surgeon General, with the approval of the  
24 Administrator, unless specifically otherwise provided, shall  
25 promulgate all other regulations necessary to the administra-



1 tion of the Service, including regulations with respect to  
2 travel, transportation of household goods and effects, allot-  
3 ments from their pay by commissioned officers, and uniforms  
4 for employees, and regulations with respect to the custody,  
5 use, and preservation of the records, papers, and property  
6 of the Service.

7 (c) No regulation relating to qualifications for appoint-  
8 ment of medical officers or employees shall give preference to  
9 any school of medicine.

#### 10 USE OF SERVICE IN EMERGENCY

11 SEC. 216. In time of war, or of emergency pro-  
12 claimed by the President, he may utilize the Service to such  
13 extent and in such manner as shall in his judgment promote  
14 the public interest, and in time of war he may by Executive  
15 order declare the commissioned corps of the Service to be a  
16 military service. Upon such declaration, and during the  
17 period of such war or such part thereof as the President shall  
18 prescribe, the commissioned corps (1) shall constitute a  
19 branch of the land and naval forces of the United States, and  
20 (2) to the extent prescribed by regulations of the President,  
21 shall be subject to the Articles of War and to the Articles for  
22 the Government of the Navy: *Provided*, That during such  
23 period or part thereof the commissioned corps shall continue  
24 to operate as part of the Service except to the extent that the  
25 President may direct as Commander in Chief.

## 1 NATIONAL ADVISORY HEALTH AND CANCER COUNCILS

2 SEC. 217. (a) The National Advisory Health Council  
3 shall consist of fourteen members. The Director of the Na-  
4 tional Institute of Health, and three experts, one each from  
5 the Army, the Navy, and the Bureau of Animal Industry, to  
6 be detailed by the Secretary of War, the Secretary of the  
7 Navy, and the Secretary of Agriculture, respectively, shall be  
8 ex officio members of the Council. The Surgeon General,  
9 with the approval of the Administrator, shall appoint, without  
10 regard to the civil-service laws, ten members of the Coun-  
11 cil who shall be persons, not otherwise in the employ of  
12 the United States, skilled in the sciences related to health.  
13 Each appointed member shall hold office for a term of  
14 five years, except that any member appointed to fill a  
15 vacancy occurring prior to the expiration of the term for  
16 which his predecessor was appointed shall be appointed for  
17 the remainder of such term. An appointed member shall not  
18 be eligible to serve continuously for more than five years  
19 but shall be eligible for reappointment if he has not served  
20 immediately preceding his reappointment.

21 (b) The National Advisory Health Council shall advise,  
22 consult with, and make recommendations to, the Surgeon  
23 General on matters relating to health activities and functions  
24 of the Service. The Surgeon General is authorized to utilize  
25 the services of any member or members of the Council, and

1 where appropriate, any member or members of the National  
2 Advisory Cancer Council in connection with matters related  
3 to the work of the Service, for such periods, in addition to  
4 conference periods, as he may determine.

5 (c) The National Advisory Cancer Council shall consist  
6 of the Surgeon General ex officio, who shall be Chairman, and  
7 of six members to be appointed without regard to the civil-  
8 service laws by the Surgeon General with the approval of the  
9 Administrator. The six appointed members shall be selected  
10 from leading medical or scientific authorities who are out-  
11 standing in the study, diagnosis, or treatment of cancer. Each  
12 appointed member shall hold office for a term of three years,  
13 except that any member appointed to fill a vacancy occurring  
14 prior to the expiration of the term for which his predecessor  
15 was appointed shall be appointed for the remainder of such  
16 term. An appointed member shall not be eligible to serve  
17 continuously for more than three years but shall be eligible  
18 for reappointment if he has not served immediately preceding  
19 his reappointment.

20 TITLE III—GENERAL POWERS AND DUTIES OF  
21 PUBLIC HEALTH SERVICE

22 PART A—RESEARCH AND INVESTIGATIONS

23 IN GENERAL

24 SEC. 301. The Surgeon General shall conduct in the  
25 Service, and encourage, cooperate with, and render assistance



1 to other appropriate public authorities, scientific institutions,  
2 and scientists in the conduct of, and promote the coordination  
3 of, research, investigations, experiments, demonstrations, and  
4 studies relating to the causes, diagnosis, treatment, control,  
5 and prevention of physical and mental diseases and impair-  
6 ments of man, including water purification, sewage treatment,  
7 and pollution of lakes and streams. In carrying out the fore-  
8 going the Surgeon General is authorized to—

9 (a) Collect and make available through publications  
10 and other appropriate means, information as to, and the  
11 practical application of, such research and other activities;

12 (b) Make available research facilities of the Service  
13 to appropriate public authorities, and to health officials  
14 and scientists engaged in special study;

15 (c) Establish and maintain research fellowships in  
16 the Service with such stipends and allowances, including  
17 traveling and subsistence expenses, as he may deem  
18 necessary to procure the assistance of the most brilliant  
19 and promising research fellows from the United States  
20 and abroad;

21 (d) Make grants in aid to universities, hospitals,  
22 laboratories, and other public or private institutions, and  
23 to individuals for such research projects as are recom-  
24 mended by the National Advisory Health Council, or,



1 with respect to cancer, recommended by the National  
2 Advisory Cancer Council;

3 (e) Secure from time to time and for such periods  
4 as he deems advisable, the assistance and advice of  
5 experts, scholars, and consultants from the United States  
6 or abroad;

7 (f) For purposes of study, admit and treat at in-  
8 stitutions, hospitals, and stations of the Service, persons  
9 not otherwise eligible for such treatment; and

10 (g) Adopt, upon recommendation of the National  
11 Advisory Health Council, or, with respect to cancer,  
12 upon recommendation of the National Advisory Cancer  
13 Council, such additional means as he deems necessary  
14 or appropriate to carry out the purposes of this section.

15 NARCOTICS

16 SEC. 302. (a) In carrying out the purposes of section  
17 301 with respect to narcotics, the studies and investigations  
18 shall include the use and misuse of narcotic drugs, the  
19 quantities of crude opium, coca leaves, and their salts, de-  
20 rivatives, and preparations, together with reserves thereof,  
21 necessary to supply the normal and emergency medicinal  
22 and scientific requirements of the United States. The results  
23 of studies and investigations of the quantities of crude opium,  
24 coca leaves, or other narcotic drugs, together with such re-  
25 serves thereof, as are necessary to supply the normal and

1 emergency medicinal and scientific requirements of the  
2 United States, shall be reported not later than the 1st day  
3 of September each year to the Secretary of the Treasury,  
4 to be used at his discretion in determining the amounts of  
5 crude opium and coca leaves to be imported under the Nar-  
6 cotic Drugs Import and Export Act, as amended.

7 (b) The Surgeon General shall cooperate with States  
8 for the purpose of aiding them to solve their narcotic drug  
9 problems and shall give authorized representatives of the  
10 States the benefit of his experience in the care, treatment, and  
11 rehabilitation of narcotic addicts to the end that each State  
12 may be encouraged to provide adequate facilities and methods  
13 for the care and treatment of its narcotic addicts.

#### 14 PART B—FEDERAL-STATE COOPERATION

##### 15 IN GENERAL

16 SEC. 311. The Surgeon General is authorized to accept  
17 from State and local authorities any assistance in the enforce-  
18 ment of quarantine regulations made pursuant to this Act  
19 which such authorities may be able and willing to provide.  
20 The Surgeon General shall also assist States and their political  
21 subdivisions in the prevention and suppression of communi-  
22 cable diseases, shall cooperate with and aid State and local  
23 authorities in the enforcement of their quarantine and other  
24 health regulations and in carrying out the purposes specified  
25 in section 314, and shall advise the several States on matters

1 relating to the preservation and improvement of the public  
2 health.

3 HEALTH CONFERENCES

4 SEC. 312. A conference of the health authorities of the  
5 several States shall be called annually by the Surgeon Gen-  
6 eral. Whenever in his opinion the interests of the public  
7 health would be promoted by a conference, the Surgeon  
8 General may invite as many of such health authorities to con-  
9 fer as he deems necessary or proper. Upon the application  
10 of health authorities of five or more States it shall be the duty  
11 of the Surgeon General to call a conference of all State and  
12 Territorial health authorities joining in the request. Each  
13 State represented at any conference shall be entitled to a  
14 single vote.

15 COLLECTION OF VITAL STATISTICS

16 SEC. 313. To secure uniformity in the registration of  
17 mortality, morbidity, and vital statistics the Surgeon General  
18 shall prepare and distribute suitable and necessary forms for  
19 the collection and compilation of such statistics which shall  
20 be published as a part of the health reports published by the  
21 Surgeon General.

22 GRANTS AND SERVICES TO STATES

23 SEC. 314. (a) To enable the Surgeon General to carry  
24 out the purposes of section 301 with respect to developing  
25 more effective measures for the prevention, treatment, and



1 control of venereal diseases, and to assist, through grants and  
2 as otherwise provided in this section, States, counties, health  
3 districts, and other political subdivisions of the States in  
4 establishing and maintaining adequate measures for the pre-  
5 vention, treatment, and control of such diseases, including the  
6 training of personnel for State and local health work, and to  
7 enable him to prevent and control the spread of the venereal  
8 diseases in interstate traffic, and to meet the cost of pay,  
9 allowances, and traveling expenses of commissioned officers  
10 and other personnel of the Service detailed to assist in  
11 carrying out the purposes of this section with respect to the  
12 venereal diseases, and to administer this section with respect  
13 to such diseases, there is hereby authorized to be appro-  
14 priated for each fiscal year a sum sufficient to carry out  
15 the purposes of this subsection.

16 (b) To enable the Surgeon General to assist, through  
17 grants and as otherwise provided in this section, States,  
18 counties, health districts, and other political subdivisions of  
19 the States in establishing and maintaining adequate public  
20 health services, including grants for demonstrations and for  
21 the training of personnel for State and local health work,  
22 there is hereby authorized to be appropriated for each fiscal  
23 year a sum not to exceed \$20,000,000. Of the sum appro-  
24 priated for each fiscal year pursuant to this subsection there  
25 shall be available an amount, not to exceed \$2,000,000, to



1 enable the Surgeon General to provide demonstrations and  
2 to train personnel for State and local health work and to  
3 meet the cost of pay, allowances, and traveling expenses  
4 of commissioned officers and other personnel of the Service  
5 detailed to assist States in carrying out the purposes of this  
6 subsection.

7 (c) For each fiscal year, the Surgeon General, with the  
8 approval of the Administrator, shall determine the total sum  
9 from the appropriation under subsection (a) and the total  
10 sum from the appropriation under subsection (b) which  
11 shall be available for allotment among the several States.  
12 He shall, in accordance with regulations, from time to time  
13 make allotments from such sums to the several States on  
14 the basis of (1) the population, (2) the size of the venereal-  
15 disease problem and the size of other special health problems,  
16 respectively, and (3) the financial need of the respective  
17 States. Upon making such allotments the Surgeon General  
18 shall notify the Secretary of the Treasury of the amounts  
19 thereof.

20 (d) The Surgeon General, with the approval of the  
21 Administrator, shall from time to time determine the amounts  
22 to be paid to each State from the allotments to such State,  
23 and shall certify to the Secretary of the Treasury, the amounts  
24 so determined, reduced or increased, as the case may be, by  
25 the amounts by which he finds that estimates of required

1 expenditures with respect to any prior period were greater  
2 or less than the actual expenditures for such period. Upon  
3 receipt of such certification, the Secretary of the Treasury  
4 shall, through the Division of Disbursement of the Treasury  
5 Department and prior to audit or settlement by the General  
6 Accounting Office, pay in accordance with such certification.

7 (e) The moneys so paid to any State shall be ex-  
8 pended solely in carrying out the purposes specified in sub-  
9 section (a) or subsection (b) of this section, as the case  
10 may be, and in accordance with plans presented by the  
11 health authority of such State and approved by the Surgeon  
12 General.

13 (f) Money so paid shall be paid upon the condition that  
14 there shall be spent in such State for the same general pur-  
15 pose from funds of such State and its political subdivisions  
16 an amount determined in accordance with regulations.

17 (g) Whenever the Surgeon General, after reasonable  
18 notice and opportunity for hearing to the health authority of  
19 the State, finds that, with respect to money paid to the State  
20 out of appropriations under subsection (a) or subsection  
21 (b), as the case may be, there is a failure to comply sub-  
22 stantially with either—

- 23 (1) the provisions of this section;  
24 (2) the plan submitted under subsection (e); or  
25 (3) the regulations;

1 the Surgeon General shall notify such State health authority  
2 either that further payments will not be made to the State  
3 from appropriations under such subsection (or in his discre-  
4 tion that further payments will not be made to the State  
5 from such appropriations for activities in which there is such  
6 failure), until he is satisfied that there will no longer be any  
7 such failure. Until he is so satisfied the Surgeon General  
8 shall make no further certification for payment to such State  
9 from appropriations under such subsection, or shall limit  
10 payment to activities in which there is no such failure.

11 (h) All regulations and amendments thereto with re-  
12 spect to grants to States under this section shall be made  
13 after consultation with a conference of the State health  
14 authorities. Insofar as practicable, the Surgeon General shall  
15 obtain the agreement of the State health authorities prior to  
16 the issuance of any such regulations or amendments.

17 (i) Funds appropriated under subsection (a) of this  
18 section, in addition to being available for payments to States,  
19 shall also be available for expenditure by the Surgeon Gen-  
20 eral in otherwise carrying out such subsection, including  
21 expenditures for printing and binding of the findings of  
22 investigations, and for pay and allowances and traveling  
23 expenses of personnel of the Service engaged in activities  
24 authorized by such subsection.

## 1 HEALTH EDUCATION AND INFORMATION

2 SEC. 315. From time to time the Surgeon General shall  
3 issue information related to public health, in the form of publi-  
4 cations or otherwise, for the use of the public, and shall  
5 publish weekly reports of health conditions in the United  
6 States and other countries and other pertinent health informa-  
7 tion for the use of persons and institutions engaged in work  
8 related to the functions of the Service.

## 9 PART C—HOSPITALS, MEDICAL EXAMINATIONS, AND

## 10 MEDICAL CARE

## 11 HOSPITALS

12 SEC. 321. The Surgeon General, pursuant to regulations,  
13 shall—

14 (a) Control, manage, and operate all institutions,  
15 hospitals, and stations of the Service, and provide for  
16 the care, treatment and hospitalization of patients, includ-  
17 ing the furnishing of prosthetic and orthopedic devices;

18 (b) Provide for the transfer of Public Health Serv-  
19 ice patients, in the care of attendants where necessary,  
20 between hospitals and stations operated by the Service  
21 or between such hospitals and stations and other hos-  
22 pitals and stations in which Public Health Service  
23 patients may be received, and the payment of expenses  
24 of such transfer;



(c) Provide for the disposal of articles produced by patients in the course of their curative treatment, either by allowing the patient to retain such articles or by selling them and depositing the money received therefor to the credit of the appropriation from which the materials for making the articles were purchased; and

(d) Provide for the disposal of money and effects,  
in the custody of the hospitals or stations, of deceased  
patients.

11 CARE AND TREATMENT OF SEAMEN AND CERTAIN OTHER  
12 PERSONS

13 SEC. 322. (a) The following persons shall be entitled,  
14 in accordance with regulations, to medical, surgical, and  
15 dental treatment and hospitalization without charge at hos-  
16 pitals and other stations of the Service:

17           (1) Seamen employed on vessels of the United  
18       States registered, enrolled, and licensed under the mari-  
19       time laws thereof, other than canal boats engaged in the  
20       coasting trade;

(2) Seamen employed on United States or foreign  
flag vessels as employees of the United States through  
the War Shipping Administration;

24 (3) Seamen, not enlisted or commissioned in the  
25 military or naval establishments, who are employed on

1 State school ships or on vessels of the United States  
2 Government of more than five tons' burden;

3 (4) Cadets at State maritime academies or on State  
4 training ships;

5 (5) Seamen on vessels of the Mississippi River  
6 Commission and, upon application of their commanding  
7 officers, officers and crews of vessels of the Fish and  
8 Wildlife Service;

9 (6) Enrollees in the United States Maritime Service  
10 on active duty and members of the Merchant Marine  
11 Cadet Corps; and

12 (7) Employees and noncommissioned officers in the  
13 field service of the Public Health Service when injured  
14 or taken sick in line of duty.

15 (b) When suitable accommodations are available, sea-  
16 men on foreign-flag vessels may be given medical, surgical,  
17 and dental treatment and hospitalization on application of  
18 the master, owner, or agent of the vessel at hospitals and  
19 other stations of the Service at rates fixed by regulations.  
20 All expenses connected with such treatment, including burial  
21 in the event of death, shall be paid by such master, owner,  
22 or agent. No such vessel shall be granted clearance until  
23 such expenses are paid or their payment appropriately guar-  
24 anteed to the Collector of Customs.

25 (c) Any person when detained in accordance with quar-

antine laws, or, at the request of the Immigration and Naturalization Service, any person detained by that Service, may be treated and cared for by the Public Health Service.

(d) Persons not entitled to treatment and care at institutions, hospitals, and stations of the Service may, in accordance with regulations of the Surgeon General, be admitted thereto for temporary treatment and care in case of emergency.

(e) Persons entitled to care and treatment under subsection (a) of this section may, in accordance with regulations, receive such care and treatment at the expense of the Service from public or private medical or hospital facilities other than those of the Service, when authorized by the officer in charge of the station at which the application is made.

#### CARE AND TREATMENT OF FEDERAL PRISONERS

SEC. 323. The Service shall supervise and furnish medical treatment and other necessary medical, psychiatric, and related technical and scientific services, authorized by the Act of May 13, 1930, as amended (U. S. C., 1940 edition, title 18, secs. 751, 752), in penal and correctional institutions of the United States.

#### EXAMINATION AND TREATMENT OF FEDERAL EMPLOYEES

SEC. 324. The Surgeon General is authorized to provide at institutions, hospitals, and stations of the Service medical, surgical, and hospital services and supplies for persons en-

1 titled to treatment under the United States Employees' Com-  
2 pension Act and extensions thereof. The Surgeon General  
3 may also provide for making medical examinations of—

4 (a) employees of the Alaska Railroad and employ-  
5 ees of the Federal Government for retirement purposes;

6 (b) employees in the Federal classified service, and  
7 applicants for appointment, as requested by the Civil  
8 Service Commission for the purpose of promoting health  
9 and efficiency;

10 (c) seamen for purposes of qualifying for cer-  
11 tificates of service; and

12 (d) employees eligible for benefits under the  
13 Longshoremen's and Harbor Workers' Compensation  
14 Act, as amended (U. S. C., 1940 edition, title 33,  
15 chapter 18), as requested by any deputy commis-  
16 sioner thereunder.

#### 17 EXAMINATION OF ALIENS

18 SEC. 325. The Surgeon General shall provide for making,  
19 at places within the United States or in other countries,  
20 such physical and mental examinations of aliens as are  
21 required by the immigration laws, subject to administra-  
22 tive regulations prescribed by the Attorney General and  
23 medical regulations prescribed by the Surgeon General with  
24 the approval of the Administrator.



1 SERVICES TO COAST GUARD, COAST AND GEODETIC SURVEY,  
2 AND PUBLIC HEALTH SERVICE

3 SEC. 326. (a) Subject to regulations of the President—

4 (1) commissioned officers, chief warrant officers,  
5 warrant officers, cadets, and enlisted personnel of the  
6 Regular Coast Guard, including those on shore duty  
7 and those on detached duty, whether on active duty  
8 or retired; and Regular and temporary members of  
9 the United States Coast Guard Reserve when on active  
10 duty or when retired for disability;

11 (2) commissioned officers, ships' officers, and  
12 members of the crews of vessels of the United States  
13 Coast and Geodetic Survey, including those on shore  
14 duty and those on detached duty, whether on active  
15 duty or retired; and

16 (3) commissioned officers of the Regular Corps  
17 of the Public Health Service, whether on active duty  
18 or retired, and commissioned officers of the Reserve  
19 Corps when on active duty or when retired for dis-  
20 ability;

21 shall be entitled to medical, surgical, and dental treatment  
22 and hospitalization by the Service. The Surgeon General  
23 may detail commissioned officers for duty aboard vessels of  
24 the Coast Guard or the Coast and Geodetic Survey.

25 (b) Subject to regulations of the President, the depend-

ent members of families (as defined in such regulations) of persons specified in subsection (a), other than temporary members of the United States Coast Guard Reserve, shall be furnished medical advice and out-patient treatment by the Service at its hospitals and relief stations, and they shall also be furnished hospitalization at hospitals of the Service, if suitable accommodations are available, at a per diem cost to the officer, enlisted person, or member of a crew concerned. Such cost shall be at such uniform rate as may be prescribed in such regulations of the President.

(c) The Service shall provide all services referred to in subsection (a) required by the Coast Guard and shall perform all duties prescribed by statute in connection with the examinations to determine physical or mental condition for purposes of appointment, enlistment, and reenlistment, promotion and retirement, and officers of the Service assigned to duty on Coast Guard vessels may extend aid to the crews of American vessels engaged in deep-sea fishing.

#### INTERDEPARTMENTAL WORK

SEC. 327. Nothing contained in this part shall affect the authority of the Service to furnish any materials, supplies, or equipment, or perform any work or services, requested in accordance with section 7 of the Act of May 21, 1920, as amended (U. S. C., 1940 edition, title 31, sec. 686), or the authority of any other executive department

1 to furnish any materials, supplies, or equipment, or perform  
2 any work or services, requested by the Federal Security  
3 Agency for the Service in accordance with that section.

4 PART D—LEPERS

5 RECEIPT OF LEPERS

6 SEC. 331. The Service shall, in accordance with regu-  
7 lations, receive into any hospital of the Service suitable for  
8 his accommodation any person afflicted with leprosy who  
9 presents himself for care, detention, or treatment, or who may  
10 be apprehended under section 332 or 361 of this Act, and  
11 any person afflicted with leprosy duly consigned to the care  
12 of the Service by the proper health authority of any State,  
13 Territory, or the District of Columbia. The Surgeon General  
14 is authorized, upon the request of any health authority, to  
15 send for any person within the jurisdiction of such authority  
16 who is afflicted with leprosy and to convey such person to the  
17 appropriate hospital for detention and treatment. When the  
18 transportation of any such person is undertaken for the pro-  
19 tection of the public health the expense of such removal shall  
20 be met from funds available for the maintenance of hospitals  
21 of the Service.

22 APPREHENSION, DETENTION, TREATMENT, AND RELEASE

23 SEC. 332. The Surgeon General may provide by regu-  
24 lation for the apprehension, detention, treatment, and release  
25 of persons being treated by the Service for leprosy.

## PART E—NARCOTICS ADDICTS

## CARE AND TREATMENT

SEC. 341. The Surgeon General is authorized to provide for the confinement, care, protection, treatment, and discipline of persons addicted to the use of habit-forming narcotic drugs who voluntarily submit themselves for treatment and addicts who have been or are hereafter convicted of offenses against the United States, including persons convicted by general courts martial and consular courts. Such care and treatment shall be provided at hospitals of the Service especially equipped for the accommodation of such patients and shall be designed to rehabilitate such persons, to restore them to health, and, where necessary, to train them to be self-supporting and self-reliant.

## EMPLOYMENT OF ADDICTS

SEC. 342. Narcotic addicts in hospitals of the Service designated for their care shall be employed in such manner and under such conditions as the Surgeon General may direct. In such hospitals the Surgeon General may, in his discretion, establish industries, plants, factories, or shops for the production and manufacture of articles, commodities, and supplies for the United States Government. The Secretary of the Treasury may require any Government department, establishment, or other institution, for whom appropriations are



1 made directly or indirectly by the Congress of the United  
2 States, to purchase at current market prices, as determined  
3 by him or his authorized representative, such of the articles,  
4 commodities, or supplies so produced or manufactured as  
5 meet their specifications; and the Surgeon General shall pro-  
6 vide for payment to the inmates or their dependents of such  
7 pecuniary earnings as he may deem proper. The Adminis-  
8 trator shall establish a working-capital fund for such in-  
9 dustries, plants, factories, and shops out of any funds appro-  
10 priated for Public Health Service hospitals at which addicts  
11 are treated and cared for; and such fund shall be available  
12 for the purchase, repair, or replacement of machinery or  
13 equipment, for the purchase of raw materials and supplies,  
14 for the purchase of uniforms and other distinctive wearing  
15 apparel of employees in the performance of their official  
16 duties, and for the employment of necessary civilian officers  
17 and employees. The Surgeon General may provide for the  
18 disposal of products of the industrial activities conducted  
19 pursuant to this section, and the proceeds of any sales thereof  
20 shall be covered into the Treasury of the United States to  
21 the credit of the working-capital fund.

22

## CONVICTS

23 SEC. 343. (a) The authority vested with the power to  
24 designate the place of confinement of a prisoner shall transfer  
25 to hospitals of the Service especially equipped for the ac-

1 commodation of addicts, if accommodations are available,  
2 all addicts who have been or are hereafter sentenced to con-  
3 finement, or who are now or shall hereafter be confined, in  
4 any penal, correctional, disciplinary, or reformatory institu-  
5 tion of the United States, including those addicts convicted  
6 of offenses against the United States who are confined in  
7 State and Territorial prisons, penitentiaries, and reformatories,  
8 except that no addict shall be transferred to a hospital of the  
9 Service who, in the opinion of the officer authorized to direct  
10 the transfer, is not a proper subject for confinement in such  
11 an institution either because of the nature of the crime he has  
12 committed or because of his apparent incorrigibility. The  
13 authority vested with the power to designate the place of  
14 confinement of a prisoner shall transfer from a hospital of the  
15 Service to the institution from which he was received, or to  
16 such other institution as may be designated by the proper  
17 authority, any addict whose presence at a hospital of the  
18 Service is detrimental to the well-being of the hospital or who  
19 does not continue to be a narcotic addict. All transfers of  
20 such prisoners to or from a hospital of the Service shall be  
21 accompanied by necessary attendants as directed by the  
22 officer in charge of such hospital and the actual and necessary  
23 expenses incident to such transfers shall be paid from the  
24 appropriation for the maintenance of such Service hospital  
25 except to the extent that other Federal agencies are author-

1 ized or required by law to pay expenses incident to such  
2 transfers. Whenever an alien addict transferred to a Serv-  
3 ice hospital pursuant to this subsection is entitled to his dis-  
4 charge but is subject to deportation, in lieu of being returned  
5 to the penal institution from which he came he shall be de-  
6 ported by the authority vested by law with power over  
7 deportation.

8 (b) The provisions of the Act of June 21, 1902, as  
9 amended (U. S. C., 1940 edition, title 18, secs. 710-712a),  
10 regulating commutation of sentence for good conduct of  
11 United States prisoners, section 8 of the Act of May 27, 1930  
12 (U. S. C., 1940 edition, title 18, sec. 744h), regulating  
13 commutation of sentence for employment in industry, and  
14 the Act of June 25, 1910, as amended (U. S. C., 1940  
15 edition, title 18, secs. 714-723c), relating to parole, shall be  
16 applicable to any narcotic addict confined in any institution  
17 in execution of a judgment or sentence upon conviction of  
18 an offense against the United States; except that no narcotic  
19 addict confined in any institution, whether or not an institu-  
20 tion of the Public Health Service, shall be released by reason  
21 of commutation of sentence or parole until the Surgeon  
22 General shall have certified that such individual is no longer  
23 an addict.

24 (c) Not later than one month prior to the expiration  
25 of the sentence of any addict confined in a Service hospital,

1 he shall be examined by the Surgeon General or his author-  
2 ized representative. If the Surgeon General believes the  
3 person to be discharged is still an addict and that he may by  
4 further treatment in a Service hospital be cured of his ad-  
5 diction, the addict shall be informed, in accordance with  
6 regulations, of the advisability of his submitting himself to  
7 further treatment. The addict may then apply in writing  
8 to the Surgeon General for further treatment in a Service  
9 hospital for a period not exceeding the maximum length of  
10 time considered necessary by the Surgeon General. Upon  
11 approval of the application by the Surgeon General or his  
12 authorized agent, the addict may be given such further  
13 treatment as is necessary to cure him of his addiction.

14 (d) Every person convicted of an offense against the  
15 United States, upon discharge, or upon release on parole,  
16 from a hospital of the Service, shall be furnished with the gra-  
17 tuities and transportation authorized by law to be furnished  
18 to prisoners upon release from a penal, correctional, disci-  
19 plinary, or reformatory institution.

20 (e) Any court of the United States having the power  
21 to suspend the imposition or execution of sentence and to  
22 place a defendant on probation under any existing laws may  
23 impose as one of the conditions of such probation that the  
24 defendant, if an addict, shall submit himself for treatment  
25 at a hospital of the Service especially equipped for the



1 accommodation of addicts until discharged therefrom as  
2 cured and that he shall be admitted thereto for such purpose.  
3 Upon the discharge of any such probationer from a hospital  
4 of the Service, he shall be furnished with the gratuities and  
5 transportation authorized by law to be furnished to prisoners  
6 upon release from a penal, correctional, disciplinary, or  
7 reformatory institution. The actual and necessary expense  
8 incident to transporting such probationer to such hospital  
9 and to furnishing such transportation and gratuities shall  
10 be paid from the appropriation for the maintenance of such  
11 hospital except to the extent that other Federal agencies  
12 are authorized or required by law to pay the cost of such  
13 transportation: *Provided*, That where existing law vests a  
14 discretion in any officer as to the place to which transporta-  
15 tion shall be furnished or as to the amount of clothing and  
16 gratuities to be furnished, such discretion shall be exercised  
17 by the Surgeon General with respect to addicts discharged  
18 from hospitals of the Service.

19 VOLUNTARY PATIENTS

20 SEC. 344. (a) Any addict, whether or not he shall have  
21 been convicted of an offense against the United States, may  
22 apply to the Surgeon General for admission to a hospital  
23 of the Service especially equipped for the accommodation  
24 of addicts.

25 (b) Any applicant shall be examined by the Surgeon

1 General who shall determine whether the applicant is an  
2 addict, whether by treatment in a hospital of the Service he  
3 may probably be cured of his addiction, and the estimated  
4 length of time necessary to effect his cure. The Surgeon  
5 General may, in his discretion, admit the applicant to a Serv-  
6 ice hospital. No such addict shall be admitted unless he  
7 agrees to submit to treatment for the maximum amount of  
8 time estimated by the Surgeon General to be necessary to  
9 effect a cure, and unless suitable accommodations are avail-  
10 able after all eligible addicts convicted of offenses against  
11 the United States have been admitted. Any such addict  
12 may be required to pay for his subsistence, care, and treat-  
13 ment at rates fixed by the Surgeon General and amounts so  
14 paid shall be covered into the Treasury of the United States  
15 to the credit of the appropriation from which the expenditure  
16 for his subsistence, care, and treatment was made.

17 (d) Any addict admitted for treatment under this sec-  
18 tion, including any addict, not convicted of an offense, who  
19 voluntarily submits himself for treatment, may be confined  
20 in a hospital of the Service for a period not exceeding the  
21 maximum amount of time estimated by the Surgeon General  
22 as necessary to effect a cure of the addiction or until such  
23 time as he ceases to be an addict.

24 (c) Any addict admitted for treatment under this sec-  
25 tion shall not thereby forfeit or abridge any of his rights as a

1 citizen of the United States; nor shall such admission or  
2 treatment be used against him in any proceeding in any  
3 court; and the record of his voluntary commitment shall be  
4 confidential and shall not be divulged.

5 **PENALTIES**

6 SEC. 345. (a) Any person not authorized by law or by  
7 the Surgeon General who introduces or attempts to intro-  
8 duce into or upon the grounds of any hospital of the Service  
9 at which addicts are treated and cared for, any habit-  
10 forming narcotic drug, weapon, or any other contraband  
11 article or thing, or any contraband letter or message intended  
12 to be received by an inmate thereof, shall be guilty of a felony  
13 and, upon conviction thereof, shall be punished by imprison-  
14 ment for not more than ten years.

15 (b) It shall be unlawful for any person properly com-  
16 mitted thereto to escape or attempt to escape from a hos-  
17 pital of the Service at which addicts are treated and cared  
18 for, and any such person upon apprehension and conviction  
19 in a United States court shall be punished by imprisonment  
20 for not more than five years, such sentence to begin upon  
21 the expiration of the sentence for which such person was  
22 originally confined.

23 (c) Any person who procures the escape of any person  
24 admitted to a hospital of the Service at which addicts are  
25 treated and cared for, or who advises, connives at, aids, or

1 assists in such escape, or who conceals any such inmate  
2 after such escape, shall be punished upon conviction in a  
3 United States court by imprisonment in the penitentiary  
4 for not more than three years.

## 5 PART F—BIOLOGICAL PRODUCTS

### 6 REGULATION OF BIOLOGICAL PRODUCTS

7 SEC. 351. (a) No person shall sell, barter, or exchange,  
8 or offer for sale, barter, or exchange in the District of Colum-  
9 bia, or send, carry, or bring for sale, barter, or exchange  
10 from any State or possession into any other State or pos-  
11 session or into any foreign country, or from any foreign  
12 country into any State or possession, any virus, therapeutic  
13 serum, toxin, antitoxin, or analogous product, or arsphen-  
14 mine or its derivatives (or any other trivalent organic arsenic  
15 compound), applicable to the prevention, treatment, or cure  
16 of diseases or injuries of man, unless (1) such virus, serum,  
17 toxin, antitoxin, or other product has been propagated or  
18 manufactured and prepared at an establishment holding an  
19 unsuspended and unrevoked license, issued by the Adminis-  
20 trator as hereinafter authorized, to propagate or manufacture,  
21 and prepare such virus, serum, toxin, antitoxin, or other  
22 product for sale in the District of Columbia, or for sending,  
23 bringing, or carrying from place to place aforesaid; and (2)  
24 each package of such virus, serum, toxin, antitoxin, or other  
25 product is plainly marked with the proper name of the article



1 contained therein, the name, address, and license number of  
2 the manufacturer, and the date beyond which the contents  
3 cannot be expected beyond reasonable doubt to yield their  
4 specific results. The suspension or revocation of any license  
5 shall not prevent the sale, barter, or exchange of any virus,  
6 serum, toxin, antitoxin, or other product aforesaid which has  
7 been sold and delivered by the licensee prior to such sus-  
8 pension or revocation, unless the owner or custodian of such  
9 virus, serum, toxin, antitoxin, or other product aforesaid has  
10 been notified by the Administrator not to sell, barter, or  
11 exchange the same.

12 (b) No person shall falsely label or mark any package  
13 or container of any virus, serum, toxin, antitoxin, or other  
14 product aforesaid; nor alter any label or mark on any pack-  
15 age or container of any virus, serum, toxin, antitoxin, or other  
16 product aforesaid so as to falsify such label or mark.

17 (c) Any officer, agent, or employee of the Federal Secu-  
18 rity Agency, authorized by the Administrator for the purpose,  
19 may during all reasonable hours enter and inspect any estab-  
20 lishment for the propagation or manufacture and preparation  
21 of any virus, serum, toxin, antitoxin, or other product afore-  
22 said for sale, barter, or exchange in the District of Columbia,  
23 or to be sent, carried, or brought from any State or possession  
24 into any other State or possession or into any foreign country,  
25 or from any foreign country into any State or possession.

1       (d) Licenses for the maintenance of establishments for  
2 the propagation or manufacture and preparation of products  
3 described in subsection (a) of this section may be issued only  
4 upon a showing that the establishment and the products for  
5 which a license is desired meet standards, designed to insure  
6 the continued safety, purity, potency and efficaciousness of  
7 such products, prescribed in regulations made jointly by the  
8 Surgeon General, the Surgeon General of the Army, and the  
9 Surgeon General of the Navy, and approved by the Adminis-  
10 trator, and licenses for new products may be issued only upon  
11 a showing that they meet such standards. All such licenses  
12 shall be issued, suspended, and revoked as prescribed by regu-  
13 lations and all licenses issued for the maintenance of estab-  
14 lishments for the propagation or manufacture and prepara-  
15 tion, in any foreign country, of any such products for sale,  
16 barter, or exchange in any State or possession shall be issued  
17 upon condition that the licensees will permit the inspection  
18 of their establishments in accordance with subsection (c)  
19 of this section.

20       (e) No person shall interfere with any officer, agent,  
21 or employee of the Service in the performance of any duty  
22 imposed upon him by this section or by regulations made  
23 by authority thereof.

24       (f) Any person who shall violate, or aid or abet in  
25 violating, any of the provisions of this section shall be pun-

1   ished upon conviction by a fine not exceeding \$500 or by  
2   imprisonment not exceeding one year, or by both such fine  
3   and imprisonment, in the discretion of the court.

4       (g) The persons and the products to which this section  
5   is applicable shall be subject also to the provisions of the  
6   Federal Food, Drug, and Cosmetic Act, except that sec-  
7   tion 505 of such Act shall not apply in the case of any virus,  
8   serum, toxin, antitoxin, or other product propagated, manu-  
9   factured, or prepared pursuant to an unsuspended and un-  
10  revoked license issued under this section.

11                   PREPARATION OF BIOLOGICAL PRODUCTS

12       SEC. 352. (a) The Service may prepare for its own use  
13   any product described in section 351 and any product neces-  
14   sary to carrying out any of the purposes of section 301.

15       (b) The Service may prepare any product described in  
16   section 351 for the use of other Federal departments or  
17   agencies, and public or private agencies and individuals  
18   engaged in work in the field of medicine when such product  
19   is not available from establishments licensed under such  
20   section.

21                   PART G—QUARANTINE AND INSPECTION

22                   CONTROL OF COMMUNICABLE DISEASES

23       SEC. 361. (a) The Surgeon General, with the approval  
24   of the Administrator, is authorized to make and enforce such  
25   regulations as in his judgment are necessary to prevent the

1 introduction, transmission, or spread of communicable diseases  
2 from foreign countries into the States or possessions, or from  
3 one State or possession into any other State or possession.  
4 For purposes of carrying out and enforcing such regulations,  
5 the Surgeon General may provide for such inspection, fumi-  
6 gation, disinfection, sanitation, pest extermination, destruction  
7 of animals or articles found to be so infected or contaminated  
8 as to be sources of dangerous infection to human beings, and  
9 other measures, as in his judgment may be necessary.

10 (b) Regulations prescribed under this section shall not  
11 provide for the apprehension, detention, or conditional re-  
12 lease of individuals except for the purpose of preventing the  
13 introduction, transmission, or spread of such communicable  
14 diseases as may be specified from time to time in Executive  
15 orders of the President upon the recommendation of the Na-  
16 tional Advisory Health Council and the Surgeon General.

17 (c) Except as provided in subsection (d), regulations  
18 prescribed under this section, insofar as they provide for  
19 the apprehension, detention, examination, or conditional re-  
20 lease of individuals, shall be applicable only to individuals  
21 coming into a State or possession from a foreign country, the  
22 Territory of Hawaii, or a possession.

23 (d) On recommendation of the National Advisory  
24 Health Council, regulations prescribed under this section may  
25 provide for the apprehension and examination of any indi-



1 vidual reasonably believed to be infected with a communi-  
2 cable disease in a communicable stage and (1) to be mov-  
3 ing or about to move from a State to another State; or (2)  
4 to be a probable source of infection to individuals who, while  
5 infected with such disease in a communicable stage, will be  
6 moving from a State to another State. Such regulations may  
7 provide that if upon examination any such individual is  
8 found to be infected, he may be detained for such time and  
9 in such manner as may be reasonably necessary.

## 10 SUSPENSION OF ENTRIES AND IMPORTS FROM DESIGNATED

11 PLACES

12        SEC. 362. Whenever the Surgeon General determines  
13 that by reason of the existence of any communicable disease  
14 in a foreign country there is serious danger of the introduction  
15 of such disease into the United States, and that this danger  
16 is so increased by the introduction of persons or property from  
17 such country that a suspension of the right to introduce such  
18 persons and property is required in the interest of the public  
19 health, the Surgeon General, in accordance with regulations  
20 approved by the President, shall have the power to prohibit,  
21 in whole or in part, the introduction of persons and property  
22 from such countries or places as he shall designate in order to  
23 avert such danger, and for such period of time as he may  
24 deem necessary for such purpose.

## SPECIAL POWERS IN TIME OF WAR

SEC. 363. To protect the military and naval forces and war workers of the United States, in time of war, against any communicable disease specified in Executive orders as provided in subsection (b) of section 361, the Surgeon General, on recommendation of the National Advisory Health Council, is authorized to provide by regulations for the apprehension and examination, in time of war, of any individual reasonably believed (1) to be infected with such disease in a communicable stage and (2) to be a probable source of infection to members of the armed forces of the United States or to individuals engaged in the production or transportation of arms, munitions, ships, food, clothing, or other supplies for the armed forces. Such regulations may provide that if upon examination any such individual is found to be so infected, he may be detained for such time and in such manner as may be reasonably necessary.

## QUARANTINE STATIONS

SEC. 364. (a) Except as provided in title II of the Act of June 15, 1917, as amended (U. S. C., 1940 edition, title 50, secs. 191-194), the Surgeon General shall control, direct, and manage all United States quarantine stations, grounds, and anchorages, designate their boundaries, and designate the quarantine officers to be in charge thereof. With the approval of the President

1 he shall from time to time select suitable sites for and estab-  
2 lish such additional stations, grounds, and anchorages in  
3 the States and possessions of the United States as in his  
4 judgment are necessary to prevent the introduction of com-  
5 municable diseases into the States and possessions of the  
6 United States.

7 (b) The Surgeon General shall establish the hours dur-  
8 ing which quarantine service shall be performed at each  
9 quarantine station, and, upon application by any interested  
10 party, may establish quarantine inspection during the twenty-  
11 four hours of the day, or any fraction thereof, at such quar-  
12 antine stations as, in his opinion, require such extended serv-  
13 ice. He may restrict the performance of quarantine inspec-  
14 tion to hours of daylight for such arriving vessels as cannot,  
15 in his opinion, be satisfactorily inspected during hours of  
16 darkness. No vessel shall be required to undergo quarantine  
17 inspection during the hours of darkness, unless the quarantine  
18 officer at such quarantine station shall deem an immediate  
19 inspection necessary to protect the public health. Uniformity  
20 shall not be required in the hours during which quarantine  
21 inspection may be obtained at the various ports of the United  
22 States.

23 CERTAIN DUTIES OF CONSULAR AND OTHER OFFICERS

24 SEC. 365. (a) Any consular or medical officer of the  
25 United States, designated for such purpose by the Adminis-

1 trator, shall make reports to the Surgeon General, on such  
2 forms and at such intervals as the Surgeon General may  
3 prescribe, of the health conditions at the port or place at  
4 which such officer is stationed.

5 (b) It shall be the duty of the customs officers and of  
6 Coast Guard officers to aid in the enforcement of quarantine  
7 rules and regulations; but no additional compensation, except  
8 actual and necessary traveling expenses, shall be allowed any  
9 such officer by reason of such services.

#### 10 BILLS OF HEALTH

11 SEC. 366. (a) Any vessel at any foreign port or place  
12 clearing or departing for any port or place in a State or  
13 possession shall be required to obtain from the consular officer  
14 of the United States or from the Public Health Service officer,  
15 or other medical officer of the United States designated by  
16 the Surgeon General, at the port or place of departure, a bill  
17 of health in duplicate, in the form prescribed by the Surgeon  
18 General. The President, from time to time, shall specify  
19 the ports at which a medical officer shall be stationed for  
20 this purpose. Such bill of health shall set forth the sanitary  
21 history and condition of said vessel, and shall state that it  
22 has in all respects complied with the regulations prescribed  
23 pursuant to subsection (c). Before granting such duplicate  
24 bill of health, such consular or medical officer shall be satis-  
25 fied that the matters and things therein stated are true.



1 The consular officer shall be entitled to demand and receive  
2 the fees for bills of health and such fees shall be established  
3 by regulation.

4 (b) Original bills of health shall be delivered to the  
5 collectors of customs at the port of entry. Duplicate copies  
6 of such bills of health shall be delivered at the time of  
7 inspection to quarantine officers at such port. The bills of  
8 health herein prescribed shall be considered as part of the  
9 ship's papers, and when duly certified to by the proper con-  
10 sular or other officer of the United States, over his official  
11 signature and seal, shall be accepted as evidence of the  
12 statements therein contained in any court of the United  
13 States.

14 (c) The Surgeon General shall from time to time pre-  
15 scribe regulations, applicable to vessels referred to in sub-  
16 section (a) of this section for the purpose of preventing the  
17 introduction into the States or possessions of the United  
18 States of any communicable disease by securing the best  
19 sanitary condition of such vessels, their cargoes, passengers,  
20 and crews. Such regulations shall be observed by such  
21 vessels prior to departure, during the course of the voyage,  
22 and also during inspection, disinfection, or other quarantine  
23 procedure upon arrival at any United States quarantine  
24 station.

25 (d) The provisions of subsections (a) and (b) of this

1 section shall not apply to vessels plying between such foreign  
2 ports on or near the frontiers of the United States and ports  
3 of the United States as are designated by treaty or may be  
4 designated by regulation; nor, to the extent prescribed by  
5 regulations, to such of the other vessels referred to in sub-  
6 section (a) hereof as may be designated in such regulations.

7 (e) It shall be unlawful for any vessel to enter any port  
8 in any State or possession of the United States to discharge  
9 its cargo, or land its passengers, except upon a certificate  
10 of the quarantine officer that regulations prescribed under  
11 subsection (c) have in all respects been complied with by  
12 such officer, the vessel, and its master. The master of every  
13 such vessel shall deliver such certificate to the collector of  
14 customs at the port of entry, together with the original bill  
15 of health and other papers of the vessel.

16 CIVIL AIR NAVIGATION AND CIVIL AIRCRAFT

17 SEC. 367. The Surgeon General is authorized to pro-  
18 vide by regulations for the application to civil air navigation  
19 and civil aircraft of any of the provisions of sections 364,  
20 365, and 366 and regulations prescribed thereunder (includ-  
21 ing penalties and forfeitures for violations of such sections and  
22 regulations), to such extent and upon such conditions as  
23 he deems necessary for the safeguarding of the public health.

24 PENALTIES

25 SEC. 368. (a) Any person who violates any regula-

1 tion prescribed under section 361, 362, or 363, or any  
2 provision of section 366 or any regulation prescribed there-  
3 under, or who enters or departs from the limits of any quar-  
4 antine station, ground, or anchorage in disregard of quaran-  
5 tine rules and regulations or without permission of the  
6 quarantine officer in charge, shall be punished by a fine of  
7 not more than \$1,000 or by imprisonment for not more than  
8 one year, or both.

9 (b) Any vessel which violates section 364 or section  
10 366, or any regulations thereunder, or under section 367,  
11 or which enters within or departs from the limits of any  
12 quarantine station, ground, or anchorage in disregard of  
13 the quarantine rules and regulations or without permission  
14 of the officer in charge, shall forfeit to the United States  
15 not more than \$5,000, the amount to be determined by  
16 the court, which shall be a lien on such vessel, to be recov-  
17 ered by proceedings in the proper district court of the United  
18 States. In all such proceedings the United States district  
19 attorney shall appear on behalf of the United States; and all  
20 such proceedings shall be conducted in accordance with the  
21 rules and laws governing cases of seizure of vessels for vio-  
22 lation of the revenue laws of the United States.

23 (c) With the approval of the Administrator, the Surgeon  
24 General may, upon application therefor, remit or mitigate any  
25 forfeiture provided for under subsection (b) of this section,

1 and he shall have authority to ascertain the facts upon all  
2 such applications.

3 ADMINISTRATION OF OATHS

4 SEC. 369. Medical officers of the United States, when  
5 performing duties as quarantine officers at any port or place  
6 within the United States, are authorized to take declarations  
7 and administer oaths in matters pertaining to the administra-  
8 tion of the quarantine laws and regulations of the United  
9 States.

10 TITLE IV—NATIONAL CANCER INSTITUTE

11 TO BE A DIVISION IN NATIONAL INSTITUTE OF HEALTH

12 SEC. 401. The National Cancer Institute shall be a  
13 division in the National Institute of Health.

14 CANCER RESEARCH, AND SO FORTH

15 SEC. 402. In carrying out the purposes of section 301  
16 with respect to cancer the Surgeon General, through the  
17 National Cancer Institute and in cooperation with the Na-  
18 tional Cancer Advisory Council, shall—

19 (a) conduct, assist, and foster researches, investi-  
20 gations, experiments, and studies relating to the cause,  
21 prevention, and methods of diagnosis and treatment of  
22 cancer;

23 (b) promote the coordination of researches con-  
24 ducted by the Institute and similar researches conducted  
25 by other agencies, organizations, and individuals;



1 (c) provide training and instruction in technical  
2 matters relating to the diagnosis and treatment of cancer;

3 (d) provide fellowships in the Institute from funds  
4 appropriated or donated for such purpose;

5 (e) secure for the Institute consultation services and  
6 advice of cancer experts from the United States and  
7 abroad;

8 (f) cooperate with State health agencies in the  
9 prevention, control, and eradication of cancer;

10 (g) procure, use, and lend radium as provided in  
11 section 403.

12 ADMINISTRATION

13 SEC. 403. (a) In carrying out the provisions of section  
14 402 all appropriate provisions of section 301 shall be ap-  
15 plicable to the authority of the Surgeon General, and he is  
16 authorized—

17 (1) to purchase radium, from time to time, without  
18 regard to section 3709 of the Revised Statutes, to make  
19 such radium available for the purposes of this title, both  
20 to the Service and by loan to other agencies and institu-  
21 tions for such consideration and subject to such condi-  
22 tions as he may prescribe;

23 (2) to provide the necessary facilities where train-  
24 ing and instruction may be given in all technical matters  
25 relating to diagnosis and treatment of cancer to persons

1 found by the Surgeon General to have proper technical  
2 qualifications, and designated by him for such training  
3 or instruction, and to fix and pay them a per diem allow-  
4 ance during such training or instruction of not to exceed  
5 \$10.

6 (b) The Surgeon General shall recommend acceptance  
7 of conditional gifts pursuant to section 501 of this Act, for  
8 study, investigation, or research into the cause, prevention,  
9 and methods of diagnosis and treatment of cancer, or for the  
10 acquisition of grounds or for the erection, equipment, or main-  
11 tenance of premises, buildings, or equipment of the Institute,  
12 only after consultation with the National Cancer Advisory  
13 Council. Donations of \$50,000 or over in aid of research  
14 under this title may be acknowledged by the establishment  
15 within the Institute of suitable memorials to the donors.

16 (c) In carrying out the purposes of section 402 grants-  
17 in-aid for cancer projects shall be made only after review and  
18 recommendation of the National Cancer Advisory Council  
19 made pursuant to section 404.

20 FUNCTIONS OF COUNCIL

21 SEC. 404. The council is authorized—

22 (a) to review research projects or programs sub-  
23 mitted to or initiated by it relating to the study of the  
24 cause, prevention, or methods of diagnosis and treatment  
25 of cancer, and certify approval to the Surgeon General,

1       for prosecution under section 402, of any such projects  
2       which it believes show promise of making valuable con-  
3       tributions to human knowledge with respect to the cause,  
4       prevention, or methods of diagnosis and treatment of  
5       cancer;

6           (b) to collect information as to studies which are  
7       being carried on in the United States or any other  
8       country as to the cause, prevention, and methods of  
9       diagnosis and treatment of cancer, by correspondence  
10      or by personal investigation of such studies, and with the  
11      approval of the Surgeon General make available such  
12      information through the appropriate publications for the  
13      benefit of health agencies and organizations (public or  
14      private), physicians, or any other scientists, and for  
15      the information of the general public;

16          (c) to review applications from any university,  
17      hospital, laboratory, or other institution whether public  
18      or private, or from individuals, for grants-in-aid for  
19      research projects relating to cancer, and certify to the  
20      Surgeon General its approval of grants-in-aid in the  
21      cases of such projects which show promise of making  
22      valuable contributions to human knowledge with respect  
23      to the cause, prevention, or methods of diagnosis or  
24      treatment of cancer;

25          (d) to recommend to the Surgeon General for

1 acceptance conditional gifts pursuant to section 501 of  
2 this Act; and

3 (e) to make recommendations to the Surgeon Gen-  
4 eral with respect to carrying out the provisions of this  
5 title.

#### 6 APPROPRIATIONS

7 SEC. 405. Appropriations to carry out the purposes of  
8 this title shall be available for the acquisition of land or the  
9 erection of buildings only if so specified, but in the absence  
10 of express limitation therein may be expended in the Dis-  
11 trict of Columbia for personal services, stenographic recording  
12 and translating services, by contract if deemed necessary,  
13 without regard to section 3709 of the Revised Statutes;  
14 traveling expenses (including the expenses of attendance at  
15 meetings when specifically authorized by the Surgeon Gen-  
16 eral) ; rental, supplies and equipment, purchase and exchange  
17 of medical books, books of reference, directories, periodicals,  
18 newspapers, and press clippings; purchase, operation, and  
19 maintenance of motor-propelled passenger-carrying vehicles;  
20 printing and binding (in addition to that otherwise provided  
21 by law) ; and for all other necessary expenses in carrying out  
22 the provisions of this title.

#### 23 OTHER WORK WITH RESPECT TO CANCER

24 SEC. 406. This title shall not be construed as limiting  
25 (1) the functions or authority of the Surgeon General or the



1 Public Health Service under any other title of this Act, or  
2 of any other officer or agency of the United States, relating  
3 to the study of the prevention, diagnosis, and treatment of  
4 cancer; or (2) the expenditure of money therefor.

## 5 TITLE V—MISCELLANEOUS

### 6 GIFTS

7 SEC. 501. (a) The Administrator is authorized to ac-  
8 cept on behalf of the United States gifts made uncondi-  
9 tionally by will or otherwise for the benefit of the  
10 Service or for the carrying out of any of its functions. Con-  
11 ditional gifts may be so accepted if recommended by the  
12 Surgeon General, and the principal of and income from any  
13 such conditional gift shall be held, invested, reinvested, and  
14 used in accordance with its conditions, but no gift shall be  
15 accepted which is conditioned upon any expenditure not to be  
16 met therefrom or from the income thereof unless such expen-  
17 diture has been approved by Act of Congress.

18 (b) Any unconditional gift of money accepted pursuant  
19 to the authority granted in subsection (a) of this section, the  
20 net proceeds from the liquidation (pursuant to subsection (c)  
21 or subsection (d) of this section) of any other property so  
22 accepted, and the proceeds of insurance on any such gift prop-  
23 erty not used for its restoration, shall be deposited in the  
24 Treasury of the United States and are hereby appropriated  
25 and shall be held in trust by the Secretary of the Treasury for

1 the benefit of the Service, and he may invest and reinvest  
2 such funds in interest-bearing obligations of the United States  
3 or in obligations guaranteed as to both principal and interest  
4 by the United States. Such gifts and the income from such  
5 investments shall be available for expenditure in the operation  
6 of the Service and the performance of its functions, subject  
7 to the same examination and audit as is provided for appro-  
8 priations made for the Service by Congress.

9 (c) The evidences of any unconditional gift of in-  
10 tangible personal property, other than money, accepted  
11 pursuant to the authority granted in subsection (a) of this  
12 section shall be deposited with the Secretary of the Treasury  
13 and he, in his discretion, may hold them, or liquidate them  
14 except that they shall be liquidated upon the request of the  
15 Administrator, whenever necessary to meet payments re-  
16 quired in the operation of the Service or the performance of  
17 its functions. The proceeds and income from any such  
18 property held by the Secretary of the Treasury shall be  
19 available for expenditure as is provided in subsection (b)  
20 of this section.

21 (d) The Administrator shall hold any real property or  
22 any tangible personal property accepted unconditionally pur-  
23 suant to the authority granted in subsection (a) of this sec-  
24 tion and he shall permit such property to be used for the  
25 operation of the Service and the performance of its functions

1 or he may lease or hire such property, and may insure such  
2 property, and deposit the income thereof with the Secretary  
3 of the Treasury to be available for expenditure as provided in  
4 subsection (b) of this section: *Provided*, That the income  
5 from any such real property or tangible personal property  
6 shall be available for expenditure in the discretion of the  
7 Administrator for the maintenance, preservation, or repair  
8 and insurance of such property and that any proceeds from  
9 insurance may be used to restore the property insured. Any  
10 such property when not required for the operation of the  
11 Service or the performance of its functions may be liquidated  
12 by the Administrator, and the proceeds thereof deposited  
13 with the Secretary of the Treasury, whenever in his judgment  
14 the purposes of the gifts will be served thereby.

15           USE OF IMMIGRATION STATION HOSPITALS

16       SEC. 502. The Immigration and Naturalization Service  
17 may, by agreement of the heads of the departments con-  
18 cerned, permit the Public Health Service to use hospitals at  
19 immigration stations for the care of Public Health Service  
20 patients. The Surgeon General shall reimburse the Immi-  
21 gration and Naturalization Service for the actual cost of  
22 furnishing fuel, light, water, telephone, and similar supplies  
23 and services, which reimbursement shall be covered into  
24 the proper Immigration and Naturalization Service appro-

1 priation, or such costs may be paid from working funds  
2 established as provided by law, but no charge shall be  
3 made for the expense of physical upkeep of the hospitals.  
4 The Immigration and Naturalization Service shall reim-  
5 burse the Surgeon General for the care and treatment of  
6 persons detained in hospitals of the Public Health Service  
7 at the request of the Immigration and Naturalization Service  
8 unless such persons are entitled to care and treatment under  
9 section 322 (a).

10 MONEY COLLECTED FOR CARE OF PATIENTS

11 SEC. 503. Money collected as provided by law for ex-  
12 penses incurred in the care and treatment of foreign seamen,  
13 and money received for the care and treatment of pay pa-  
14 tients, including any amounts received from any executive  
15 department on account of care and treatment of pay patients,  
16 shall be covered into the appropriation from which the  
17 expenses of such care and treatment were paid.

18 CARE OF PUBLIC HEALTH SERVICE PATIENTS AT SAINT  
19 ELIZABETHS HOSPITAL

20 SEC. 504. Insane patients entitled to treatment by the  
21 Service shall be admitted, upon order of the Administrator,  
22 into Saint Elizabeths Hospital or, upon order of the Surgeon  
23 General, into any hospital, institution, or station of the Serv-  
24 ice especially equipped for the accommodation of such pa-



1 tients and shall be cared for and treated therein until cured  
2 or until ordered removed by the officer authorizing such  
3 admittance.

4                                   SETTLEMENT OF CLAIMS

5       SEC. 505. The Administrator may consider, ascertain,  
6 adjust, and determine any claim which shall accrue, on ac-  
7 count of damages occasioned by collisions or incident to the  
8 operation of vessels of the Service, and for which damages  
9 such vessels are found by him to be responsible. To be con-  
10 sidered for settlement under this section, claims must be  
11 presented to the Administrator within one year of their  
12 accrual. The amount ascertained and determined to be due  
13 any claimant, not exceeding \$3,000 in any one case, shall be  
14 certified to Congress as a legal claim for payment out of  
15 appropriations that may be made therefor by Congress, to-  
16 gether with a brief statement of the character of each claim,  
17 the amount claimed, and the amount allowed. Acceptance  
18 by any claimant of the amount determined to be due under  
19 this section shall be deemed to be in full and final settlement  
20 of such claim against the Government of the United States.

21                                   TRANSPORTATION OF REMAINS OF OFFICERS

22       SEC. 506. Appropriations available for traveling ex-  
23 penses of the Service shall be available for meeting the cost of  
24 preparation for burial and of transportation to the place of

1 burial of remains of commissioned officers, and of personnel  
2 specified in regulations, who die in line of duty.

3 SETTLEMENT OF ACCOUNTS OF DECEASED OFFICERS

4 SEC. 507. (a) In the settlement of the accounts of de-  
5 ceased commissioned officers where the amount due the de-  
6 cedent's estate is less than \$1,000 and no demand is presented  
7 by a duly appointed representative of the estate, the account-  
8 ing officers may allow the amount found due to the decedent's  
9 widow or legal heirs in the following order of precedence:  
10 First, to the widow; second, if the decedent left no widow,  
11 or the widow be dead at time of settlement, then to the chil-  
12 dren or their issue, per stirpes; third, if no widow or children  
13 or their issue, then to the father and mother in equal parts,  
14 provided the father has not abandoned the support of his  
15 family, in which case to the mother alone; fourth, if either  
16 the father or mother be dead, then to the one surviving;  
17 fifth, if there be no widow, child, father, or mother at the  
18 date of settlement, then to the brothers and sisters and chil-  
19 dren of deceased brothers and sisters, per stirpes.

20 (b) Subsection (a) shall not be construed so as to pre-  
21 vent payment of funeral expenses from the amount due the de-  
22 cedent's estate if a claim therefor is presented, before settle-  
23 ment by the accounting officers, by the person or persons who  
24 actually paid such expenses.

1 TRANSFER OF FUNDS

SEC. 508. For the purpose of any reorganization under section 202, the Administrator, with the approval of the Director of the Bureau of the Budget, is authorized to make such transfers of funds between appropriations as may be necessary for the continuance of transferred functions.

## 7 AVAILABILITY OF APPROPRIATIONS

8        SEC. 509. Appropriations for carrying out the pro-  
9        visions of section 301 shall be available for expenditure for  
10       personal services and rent at the seat of Government, for  
11       books of reference, periodicals, and exhibits, and for print-  
12       ing and binding.

13 UNAUTHORIZED WEARING OF UNIFORMS

14 SEC. 510. Except as may be authorized by regulations  
15 of the President, the insignia and uniform of commissioned  
16 officers of the Service, or any distinctive part of such insignia  
17 or uniform, or any insignia or uniform any part of which is  
18 similar to a distinctive part thereof, shall not be worn, after  
19 the promulgation of such regulations, by any person other  
20 than a commissioned officer of the Service, and any person  
21 violating this section shall be subject to the penalties provided  
22 by the Act of June 3, 1916, as amended (U. S. C., 1940  
23 edition, title 10, sec. 1393), in the case of unlawful wearing  
24 of the uniform of commissioned officers of the Army.

## ANNUAL REPORT

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SEC. 511. The Surgeon General shall transmit to the Administrator, for submission to the Congress at the beginning of each regular session, a full report of the administration of the functions of the Service under this Act, including a detailed statement of receipts and disbursements.

TITLE VI—TEMPORARY AND EMERGENCY PROVISIONS AND AMENDMENTS AND REPEALS

EXISTING POSITIONS, PROCEDURES, AND SO FORTH

SEC. 601. (a) The provisions of this Act shall not affect the term or tenure of office or employment of the Surgeon General, or of any officer or employee of the Service, or of any member of the National Advisory Health Council or the National Advisory Cancer Council, in office or employed at the time of its enactment.

(b) Notwithstanding the provisions of this Act, existing positions, divisions, committees, and procedures in the Service shall continue unless and until abolished, changed, or transferred pursuant to authority granted in this Act.

EXISTING REGULATIONS, AND SO FORTH

SEC. 602. Notwithstanding the provisions of this Act, existing rules, regulations of or applicable to the Service, and Executive orders, shall remain in effect until repealed, or until modified or superseded by regulations made in accordance with the provisions of this Act.



## 1 FUNDS, APPROPRIATIONS, AND PROPERTY

2 SEC. 603. All appropriations, allocations, and other  
3 funds, and all properties available for use by the Public  
4 Health Service or any division or unit thereof shall con-  
5 tinue to be available to the Service.

## 6 APPROPRIATIONS FOR EMERGENCY HEALTH AND

## 7 SANITATION ACTIVITIES

8 SEC. 604. For each fiscal year during the continuance of  
9 the present war and during any period of demobilization after  
10 the war, there is hereby authorized to be appropriated such  
11 sum as may be necessary to enable the Surgeon General,  
12 either directly or through State health authorities, to conduct  
13 health and sanitation activities in areas adjoining military  
14 or naval reservations within or without the United States,  
15 in areas where there are concentrations of military or naval  
16 forces, in Government and private industrial plants engaged  
17 in defense work, and in areas adjoining such industrial plants.

## 18 EMPLOYEES' COMPENSATION

19 SEC. 605. (a) Section 7 of the Act of September 7,  
20 1916, entitled "An Act to provide compensation for employ-  
21 ees of the United States suffering injuries while in the per-  
22 formance of their duties, and for other purposes", as amended  
23 (U. S. C., 1940 edition, title 5, sec. 757), is amended by  
24 changing the period at the end thereof to a colon and adding  
25 the following: "*Provided*, That whenever any person is en-

1 titled to receive any benefits under this Act by reason of his  
2 injury, or by reason of the death of an employee, as defined  
3 in section 40, and is also entitled to receive from the United  
4 States any payments or benefits (other than the proceeds of  
5 any insurance policy), by reason of such injury or death under  
6 any other Act of Congress, because of service by him (or in  
7 the case of death, by the deceased) as an employee, as so  
8 defined, such person shall elect which benefits he shall re-  
9 ceive. Such election shall be made within one year after the  
10 injury or death, or such further time as the Commission may  
11 for good cause allow, and when made shall be irrevocable  
12 unless otherwise provided by law.”

13 (b) The definition of the term “employee” in section  
14 40 of such Act of September 7, 1916, as amended (U. S. C.,  
15 1940 edition, title 5, sec. 790), is amended to read as  
16 follows:

17 “The term ‘employee’ includes all civil employees of the  
18 United States and of the Panama Railroad Company, com-  
19 missioned officers of the Regular Corps of the Public Health  
20 Service, officers in the Reserve of the Public Health Service  
21 on active duty, and all persons, other than independent con-  
22 tractors and their employees, employed on the Menominee  
23 Indian Reservation in the State of Wisconsin, subsequent to  
24 September 7, 1916, in operations conducted pursuant to the  
25 Act entitled ‘An Act to authorize the cutting of timber, the

1 manufacture and sale of lumber, and the preservation of the  
2 forests on the Menominee Indian Reservation in the State of  
3 Wisconsin,' approved March 28, 1908, as amended, or any  
4 other Act relating to tribal timber and logging operations on  
5 the Menominee Reservation."

6 (c) In the case of injury or death of a commissioned  
7 officer of the Service occurring after November 10, 1943,  
8 and on or before the date of the termination of the present  
9 war, the election required by section 7 of such Act of Sep-  
10 tember 7, 1916, as amended (U. S. C., 1940 edition, title  
11 5, sec. 757), may be made, and the notice required by  
12 section 15 thereof and the written claim required by section  
13 18 thereof may be filed, within such time as may be  
14 provided by regulations of the United States Employees'  
15 Compensation Commission, but not later than the expiration  
16 of one year following the termination of the present war.  
17 Prior to the expiration of such year any such election may  
18 be revised, and such revision shall operate retroactively  
19 to the date of death or injury, but there shall be deducted  
20 from the compensation or other benefit payable pursuant  
21 to a revised election any sum (except the proceeds of any  
22 insurance policy) theretofore paid on account of such  
23 death or injury.

24 (d) In the case of death of a commissioned officer  
25 of the Service which occurred after December 7, 1941,

1 and prior to November 11, 1943, the rights provided to  
2 surviving beneficiaries by section 10 of the Public Health  
3 Service Act of 1943 shall continue notwithstanding the  
4 repeal of that Act. Such beneficiaries, in addition to the  
5 right to receive six months' pay, shall have the same right  
6 of election and of revising elections as is provided by sub-  
7 section (c) of this section, except that in case of a revised  
8 election no deduction shall be made on account of such six  
9 months' pay.

10 COMPUTATION OF RETIRED PAY IN CERTAIN CASES

11 SEC. 606. In the case of commissioned officers of the  
12 Service appointed prior to the enactment of this Act, there  
13 shall be included, in determining retired pay pursuant to  
14 section 211 (c) (1), noncommissioned service in the Public  
15 Health Service, as well as all commissioned service.

16 ALLOWANCES FOR UNIFORMS TO CERTAIN COMMISSIONED  
17 PERSONNEL

18 SEC. 607. Each commissioned officer of the Service who  
19 was appointed to the Regular Corps or called to active duty  
20 in the Reserve Corps since December 7, 1941, and prior to  
21 the enactment of this Act, and who on or after November  
22 11, 1943, was on active duty in the grade of junior assistant,  
23 assistant, or passed assistant and was receiving the pay of the  
24 first, second, or third pay period, shall be entitled to receive  
25 an allowance of \$250 for uniforms and equipment.



1 PATIENTS OF SAINT ELIZABETHS HOSPITAL IN PUBLIC  
2 HEALTH SERVICE HOSPITALS

3 SEC. 608. Insane patients entitled to treatment in Saint  
4 Elizabeths Hospital who may heretofore or hereafter, during  
5 the continuance of the present war, or during the period of  
6 six months thereafter, have been admitted to hospitals of the  
7 Service, may continue to be cared for and treated in such  
8 hospitals notwithstanding the termination of such period.

9 ELIGIBILITY OF OSTEOPATHS TO APPOINTMENT IN THE  
10 RESERVE CORPS

11 SEC. 609. For the duration of the present war and for  
12 six months thereafter graduates of reputable osteopathic col-  
13 leges shall be eligible for appointment as reserve officers in  
14 the Service.

15 TEMPORARY PROVISIONS RESPECTING MEDICAL AND  
16 HOSPITAL BENEFITS

17 SEC. 610. (a) Subject to regulations of the President,  
18 members of the Women's Reserve of the Coast Guard, or  
19 their dependents, shall be entitled to the benefits provided  
20 by section 326 for male officers and enlisted men of the  
21 Coast Guard or their dependents: *Provided*, That the hus-  
22 bands of such members shall not be considered dependents,  
23 and the children of such members shall not be considered  
24 dependents unless their father is dead or they are in fact  
25 dependent on their mother for their chief support.

1       (b) Subject to regulations of the President, lightkeepers  
 2 and assistant lightkeepers (who during their active service  
 3 were entitled to medical relief at hospitals and other sta-  
 4 tions of the Public Health Service), and officers and crews  
 5 of vessels of the former Lighthouse Service, who have been  
 6 or who may hereafter be retired under the provisions of  
 7 section 6 of the Act of June 20, 1918, as amended (U. S. C.,  
 8 1940 edition, title 33, sec. 763), shall be entitled to medical,  
 9 surgical, and dental treatment and hospitalization by the  
 10 Public Health Service.

11                               REPEAL OF EXISTING LAW

12       SEC. 611. The following statutes or parts of statutes  
 13 are hereby repealed:

14       Section 3689 in title XLI, and sections 4801, 4802,  
 15 4803, 4804, 4805, and 4806 in title LIX of the Revised  
 16 Statutes of the United States;

17       The last paragraph under the heading "Miscellaneous"  
 18 in chapter 130, 18 Statutes at Large 371, which paragraph  
 19 is the seventh beginning on page 377;

20       Chapter 156, 18 Statutes at Large 485;

21       Chapter 66, 20 Statutes at Large 37;

22       Chapter 202, 20 Statutes at Large 484;

23       Chapter 61, 21 Statutes at Large 46;

24       Section 1, and the final clause of section 2 (which reads  
 25 as follows: "and the said quarantine stations when so estab-

lished shall be conducted by the Marine Hospital Service under regulations framed in accordance with the Act of April twenty-ninth, eighteen hundred and seventy-eight”), of chapter 727, 25 Statutes at Large 355;

Chapter 19, 25 Statutes at Large 639;

Chapter 51, 26 Statutes at Large 31;

The last sentence of the paragraph headed “Office of the Supervising Surgeon General, Marine Hospital Service” in chapter 541, 26 Statutes at Large 908, which appears at page 923 and reads as follows: “And hereafter, the Supervising Surgeon General is hereby authorized to cause the detail of two surgeons and two passed assistant surgeons for duty in the Bureau, who shall each receive the pay and allowances of their respective grades in the general service.”;

Chapter 114, 27 Statutes at Large 449;

The last sentence of the paragraph headed “Office of Supervising Surgeon General, Marine Hospital Service”, in chapter 174, 28 Statutes at Large 162, which appears at page 179 and which reads as follows: “And hereafter the Supervising Surgeon General of the Marine Hospital Service is hereby authorized to cause the detail of an additional medical officer and one hospital steward for duty in the Bureau, who shall each receive the pay and allowances of his respective grade in the general service.”;

Chapter 213, 28 Statutes at Large 229;

1 Chapter 300, 28 Statutes at Large 372;

2 The last sentence of the paragraph headed "Office of  
3 Supervising Surgeon General, Marine Hospital Service", in  
4 chapter 177, 28 Statutes at Large 764, which appears at  
5 page 780 and which reads as follows: "And hereafter the  
6 Supervising Surgeon General of the Marine Hospital Service  
7 is hereby authorized to cause the detail of two hospital at-  
8 tendants from the port of New York for duty in the labora-  
9 tory of the Bureau, and who shall each receive the pay  
10 equivalent to the compensation of a first-class hospital  
11 attendant.";

12 The proviso at the end of the paragraph headed "Office  
13 of Supervising Surgeon-General Marine-Hospital Service" in  
14 chapter 265, 29 Statutes at Large 538, which appears at  
15 page 554 and which reads as follows: "*Provided*, That the  
16 Secretary of the Treasury is hereby authorized, in his discre-  
17 tion, to grant to the medical officers of the Marine-Hospital  
18 Service commissioned by the President, without deduction  
19 of pay, leaves of absence for the same period of time and in  
20 the same manner as is now authorized to be granted to  
21 officers of the Army by the Secretary of War";

22 Chapter 349, 30 Statutes at Large 976;

23 Section 10, chapter 191, 31 Statutes at Large 77, at  
24 page 80;



1       The first paragraph of section 97 of chapter 339, 31  
2 Statutes at Large 141;

3       Chapter 836, 31 Statutes at Large 1086;

4       That portion of the third paragraph of section 84 of  
5 chapter 1369, 32 Statutes at Large 691, which appears at  
6 page 711 and which reads as follows: "and the provisions  
7 of law relating to the public health and quarantine shall  
8 apply in the case of all vessels entering a port of the United  
9 States or its aforesaid possessions from said islands, where  
10 the customs officers at the port of departure shall perform  
11 the duties required by such law of consular officers in  
12 foreign ports";

13       Chapter 1370, 32 Statutes at Large 712;

14       Chapter 1378, 32 Statutes at Large 728;

15       Chapter 1443, 33 Statutes at Large 1009;

16       The last sentence of the last paragraph under the heading  
17 "Public Health and Marine Hospital Service" in chapter  
18 1484, 33 Statutes at Large 1214, which appears at page  
19 1217 and which reads as follows: "And the Secretary of the  
20 Treasury shall, for the fiscal year nineteen hundred and seven,  
21 and annually thereafter, submit to Congress, in the regular  
22 Book of Estimates, detailed estimates of the expenses of  
23 maintaining the Public Health and Marine Hospital  
24 Service,";

1       Public Resolution Numbered 21, 33 Statutes at Large  
2 1283;

3       Chapter 3433, 34 Statutes at Large 299;

4       Section 17 of chapter 1134, 34 Statutes at Large 898,  
5 at page 903;

6       That portion of the third paragraph under the heading  
7 “Back Pay and Bounty” in chapter 200, 35 Statutes at Large  
8 373, as amended by chapter 213, 52 Statutes at Large 352,  
9 which is at page 352 of 52 Statutes at Large and which reads  
10 as follows: “and of deceased commissioned officers of the  
11 Public Health Service”;

12       The proviso in the tenth paragraph under the heading  
13 “Public Health and Marine Hospital Service” in chapter  
14 285, 36 Statutes at Large 1363, which appears in the eighth  
15 paragraph on page 1394 and which reads as follows: “*Pro-*  
16 *vided*, That there may be admitted into said hospitals, for  
17 study, persons with infectious or other diseases affecting  
18 the public health, and not to exceed ten cases in any one  
19 hospital at one time”, and the substantially similar pro-  
20 visions appearing under the heading “Public Health and  
21 Marine Hospital Service” or the heading “Public Health  
22 Service” in the following statutes: Chapter 355, 37 Statutes  
23 at Large 417, at page 435; chapter 3, 38 Statutes at  
24 Large 4, at page 24; chapter 209, 39 Statutes at Large  
25 262, at page 278; chapter 28, 40 Statutes at Large 459,

1 at page 468; chapter 113, 40 Statutes at Large 634, at  
2 page 644; chapter 24, 41 Statutes at Large 163, at page  
3 175;

4 Chapter 288, 37 Statutes at Large 309;

5 The proviso at the end of the last paragraph under the  
6 heading "Public Health Service" in chapter 149, 37 Statutes  
7 at Large 912, which appears at page 915 and which reads  
8 as follows: "*Provided*, That hereafter the director of the  
9 Hygienic Laboratory shall receive the pay and allowances  
10 of a senior surgeon";

11 That portion of the second paragraph under the heading  
12 "Public Health Service" in chapter 3, 38 Statutes at Large  
13 4, which appears at page 23 and which reads as follows:  
14 "at least six of the assistant surgeons provided for hereunder  
15 shall be required to have had a special training in the  
16 diagnosis of insanity and mental defect for duty in connec-  
17 tion with the examination of arriving aliens with special  
18 reference to the detection of mental defection;";

19 The proviso at the end of the twelfth paragraph under  
20 the heading "Public Health Service" in chapter 3, 38 Stat-  
21 utes at Large 4, which appears at page 24 and which reads as  
22 follows: "*Provided*, That hereafter commissioned officers and  
23 pharmacists, and those employees of the Service devoting all  
24 their time to field work, shall be entitled to hospital relief  
25 when taken sick or injured in line of duty";

1       The last clause of chapter 124, 38 Statutes at Large 387,  
2   which reads as follows: “and the said Secretary is hereby  
3   authorized to detail for duty on revenue cutters such sur-  
4   geons and other persons of the Public Health Service as he  
5   may deem necessary”;

6       Section 5 of chapter 414, 39 Statutes at Large 536, at  
7   page 538;

8       Chapter 26, 39 Statutes at Large 872;

9       That portion of section 16 of chapter 29, 39 Statutes at  
10   Large 874, which appears at page 885 and which reads as  
11   follows: “who shall have had at least two years’ experience  
12   in the practice of their profession since receiving the degree  
13   of doctor of medicine, and”;

14       The sixth paragraph under the heading “Public Health  
15   Service” in chapter 3, 40 Statutes at Large 2, at page 6;

16       The seventh paragraph under the heading “Bureau of  
17   Mines” in chapter 27, 40 Statutes at Large 105, which is  
18   the third full paragraph appearing on page 146;

19       Chapter 37, 40 Statutes at Large 242;

20       The proviso in the fourth paragraph under the heading  
21   “Public Health Service” in chapter 113, 40 Statutes at  
22   Large 634, which appears at page 644 and which reads as  
23   follows: “*Provided*, That the pay of attendants at marine  
24   hospitals, quarantine, and immigration stations, whose pres-  
25   ent compensation is less than the rate of \$1,200 per annum,



1 may be increased to a rate not to exceed \$1,200 per  
2 annum”;

3 The proviso in the eleventh paragraph under the head-  
4 ing “Public Health Service” in chapter 113, 40 Statutes at  
5 Large 634, which appears at page 644 and which reads as  
6 follows: “*Provided*, That the Public Health Service, from  
7 and after July first, nineteen hundred and eighteen, shall  
8 pay to Saint Elizabeths Hospital the actual per capita cost of  
9 maintenance in the said hospital of patients committed by  
10 that Service”;

11 The sixtieth paragraph under the heading “Bureau of  
12 Fisheries” in chapter 113, 40 Statutes at Large 634, which  
13 is the fourth full paragraph appearing on page 694;

14 Sections 1, 3, 4, 6, and 7 of chapter XV of chapter 143,  
15 40 Statutes at Large 845, at page 886;

16 The thirteenth paragraph under the heading “General  
17 Expenses, Bureau of Chemistry” in chapter 178, 40 Statutes  
18 at Large 973, which is the second full paragraph appearing  
19 on page 992;

20 Section 2 of chapter 179, 40 Statutes at Large 1008;

21 Chapter 196, 40 Statutes at Large 1017;

22 Chapter 98, 40 Statutes at Large 1302;

23 The last paragraph under the heading “Public Health  
24 Service” in chapter 6, 41 Statutes at Large 35, which is the  
25 sixth full paragraph appearing on page 45;

1       The proviso at the end of the first paragraph under the  
2 heading “Public Health Service” in chapter 94, 41 Statutes  
3 at Large 503, which appears at page 507, and which reads  
4 as follows: “*Provided*, That the Secretary of the Treasury  
5 is authorized to make regulations governing the disposal of  
6 articles produced by patients in the course of their curative  
7 treatment, either by allowing the patient to retain same or  
8 by selling the articles and depositing the money received to  
9 the credit of the appropriation from which the materials for  
10 making the articles were purchased”;

11       The second paragraph under the heading “Public Health  
12 Service” in chapter 94, 41 Statutes at Large 503, which is  
13 the seventh full paragraph appearing on page 507;

14       The last paragraph under the heading “Public Health  
15 Service” in chapter 94, 41 Statutes at Large 503, which is  
16 the seventh full paragraph appearing on page 508, and the  
17 substantially similar provisions in chapter 161, 41 Statutes  
18 at Large 1367, at page 1378:

19       The fourth paragraph under the heading “Quarantine  
20 Stations” in chapter 235, 41 Statutes at Large 874, which is  
21 the eighth full paragraph appearing on page 875;

22       The third paragraph under the heading “Public Health  
23 Service” in chapter 235, 41 Statutes at Large 874, which  
24 is the ninth full paragraph appearing on page 883;

25       Chapter 80, 41 Statutes at Large 1149;

1       The second paragraph under the heading "Public Health  
2 Service" in chapter 23, 42 Statutes at Large 29, which is  
3 the thirteenth full paragraph appearing on page 38;

4       The proviso at the end of section 4 of chapter 57, 42  
5 Statutes at Large 147, which appears at page 148, and which  
6 reads as follows: "*Provided*, That all commissioned personnel  
7 detailed or hereafter detailed from the United States Public  
8 Health Service to the Veterans' Bureau, shall hold the same  
9 rank and grade, shall receive the same pay and allowances,  
10 and shall be subject to the same rules for relative rank and  
11 promotion as now or hereafter may be provided by law for  
12 commissioned personnel of the same rank or grade or per-  
13 forming the same or similar duties in the United States Pub-  
14 lic Health Service";

15       The ninth paragraph under the heading "Bureau of  
16 Mines", in chapter 199, 42 Statutes at Large 552, which is  
17 the fourth full paragraph on page 588, and the substantially  
18 similar provisions in chapter 42, 42 Statutes at Large 1174,  
19 at page 1210; chapter 264, 43 Statutes at Large 390, at  
20 page 422; chapter 462, 43 Statutes at Large 1141, at page  
21 1175;

22       The last sentence of the paragraph under the heading  
23 "Public Health Service" in chapter 258, 42 Statutes at Large  
24 767, which appears at page 776 and which reads as follows:  
25 "The Immigration Service shall reimburse the Public Health

1 Service on the basis of per capita rates fixed by the Secre-  
2 tary of the Treasury and the sums received by the Public  
3 Health Service from this source shall be covered into the  
4 Treasury as miscellaneous receipts”;

5       The first proviso at the end of the ninth paragraph under  
6 the heading “Public Health Service” in chapter 84, 43  
7 Statutes at Large 64, which appears at page 75 and which  
8 reads as follows: “*Provided*, That the Immigration Service  
9 shall permit the Public Health Service to use the hospitals  
10 at Ellis Island Immigration Station for the care of the  
11 Public Health Service patients, free of expense for physi-  
12 cal upkeep, but with a charge of actual cost for fuel, light,  
13 water, telephone, and similar supplies and services, to be  
14 covered into the proper Immigration Service appropria-  
15 tions; and moneys collected by the Immigration Service  
16 on account of hospital expenses of persons detained under  
17 the immigration laws and regulations at Ellis Island Immi-  
18 gration Station shall be covered into the Treasury as  
19 miscellaneous receipts:”;

20 and substantially similar provisions under the heading “Public  
21 Health Service” in chapter 87, 43 Statutes at Large 763,  
22 at page 775; chapter 43, 44 Statutes at Large 136, at  
23 page 147; chapter 126, 45 Statutes at Large 162, at page  
24 174; chapter 39, 45 Statutes at Large 1028, at page 1039;  
25 chapter 289, 46 Statutes at Large 335, at page 347; chapter



1 110, 49 Statutes at Large 218, at page 229; chapter 725,  
 2 49 Statutes at Large 1827, at page 1839; chapter 180, 50  
 3 Statutes at Large 137, at page 149; chapter 55, 52 Statutes  
 4 at Large 120, at page 133; chapter 428, 54 Statutes at Large  
 5 574, at page 585; chapter 269, 55 Statutes at Large 466, at  
 6 page 481; and chapter 475, 56 Statutes at Large 562, at  
 7 page 581;

8 Chapter 146, 43 Statutes at Large 809;

9 The words "and public health" in the last sentence of  
 10 section 7 (b) of chapter 344, 44 Statutes at Large 568, at  
 11 page 572;

12 The words "or public-health" wherever they appear in  
 13 the second sentence of section 11 (b) of chapter 344, 44  
 14 Statutes at Large 568, at page 574, as amended;

15 Section 3 of chapter 371, 44 Statutes at Large 622, at  
 16 page 626;

17 Chapter 625, 45 Statutes at Large 603;

18 The proviso at the end of the fifth paragraph under the  
 19 heading "Public Health Service" in chapter 39, 45 Statutes  
 20 at Large 1028, which appears at page 1039, and which reads  
 21 as follows: "*Provided*, That funds expendable for transpor-  
 22 tation and traveling expenses may also be used for prepara-  
 23 tion for shipment and transportation to their former homes  
 24 of remains of officers who die in line of duty",

25 and substantially similar provisions appearing under the

1 heading "Public Health Service" in chapter 289, 46 Statutes  
 2 at Large 335, at page 346; chapter 110, 49 Statutes at Large  
 3 218, at page 228; chapter 180, 50 Statutes at Large 137, at  
 4 page 148; chapter 55, 52 Statutes at Large 120, at page 132;  
 5 chapter 428, 54 Statutes at Large 574, at page 584; chap-  
 6 ter 269, 55 Statutes at Large 466, at page 480;

7 Chapter 82, 45 Statutes at Large 1085;

8 The second paragraph under the heading "Government  
 9 in the Territories" in chapter 707, 45 Statutes at Large 1623,  
 10 which is the seventh full paragraph on page 1644;

11 So much of chapter 70, 46 Statutes at Large 81, as  
 12 reads: ", and at his discretion to permit the erection of other  
 13 buildings which may in the future be donated to promote  
 14 the welfare of patients and personnel";

15 Chapter 125, 46 Statutes at Large 150;

16 Chapter 320, 46 Statutes at Large 379;

17 Section 4 of chapter 488, 46 Statutes at Large 585;

18 Chapter 597, 46 Statutes at Large 807;

19 Chapter 409, 46 Statutes at Large 1491;

20 The words "or public health" in the last sentence of  
 21 section 2 of chapter 656, 48 Statutes at Large 1116;

22 The ninth paragraph under the heading "Public Health  
 23 Service" in chapter 110, 49 Statutes at Large 218, which is  
 24 the second full paragraph appearing on page 229;

1 Title VI of chapter 531, 49 Statutes at Large 620, at  
2 page 634;

3 Chapter 161, 49 Statutes at Large 1185;

4 That portion of chapter 550, 49 Statutes at Large 1514,  
5 which reads as follows: "or of the United States Public  
6 Health Service";

7 The proviso at the end of the thirteenth paragraph under  
8 the heading "Public Health Service" in chapter 725, 49  
9 Statutes at Large 1827, which appears at page 1840 and  
10 which reads as follows: "*Provided*, That on and after July 1,  
11 1936, the Narcotic Farm at Lexington, Kentucky, shall be  
12 known as United States Public Health Service Hospital,  
13 Lexington, Kentucky, but such change in designation shall  
14 not affect the status of any person in connection therewith  
15 or the status of such institution under any Act applicable  
16 thereto";

17 The fourth paragraph under the heading "Public Health  
18 Service" in chapter 180, 50 Statutes at Large 137, which is  
19 the sixth full paragraph on page 148;

20 Section 2 of chapter 545, 50 Statutes at Large 547;

21 Chapter 565, 50 Statutes at Large 559;

22 The first proviso in the paragraph having the subhead  
23 "Division of Mental Hygiene" under the heading "Public  
24 Health Service" in chapter 55, 52 Statutes at Large 120,  
25 which appears at page 134 and which reads as follows:

1 “*Provided*, That on and after July 1, 1938, the United States  
 2 Narcotic Farm, Fort Worth, Texas, shall be known as  
 3 United States Public Health Service Hospital of Fort Worth,  
 4 Texas, but such change in designation shall not affect the  
 5 status of any person in connection therewith or the status  
 6 of such institution under any Act applicable thereto:”;

7 Chapter 267, 52 Statutes at Large 439;

8 Chapter 92, 53 Statutes at Large 620;

9 Chapter 606, 53 Statutes at Large 1266;

10 Chapter 636, 53 Statutes at Large 1338;

11 Section 509 of chapter 666, 53 Statutes at Large 1360,  
 12 at page 1381;

13 Section 205 (b) of Reorganization Plan Numbered I,  
 14 53 Statutes at Large 1423, at page 1425;

15 Chapter 566, 54 Statutes at Large 747;

16 The fourth paragraph under the heading “Public Health  
 17 Service” in Public Law 11, Seventy-eighth Congress, at  
 18 page 4; and

19 Public Law 184, Seventy-eighth Congress.

20 PRESERVATION OF RIGHTS AND LIABILITIES

21 SEC. 612. The repeal of the several statutes or parts  
 22 of statutes accomplished by section 611 shall not affect any  
 23 act done, or any right accruing or accrued, or any suit or  
 24 proceeding had or commenced in any civil cause, before  
 25 such repeal, but all rights and liabilities under the statutes



1 or parts thereof so repealed shall continue, and may be  
2 enforced in the same manner, as if such repeal had not been  
3 made.



Union Calendar No. 458

78TH CONGRESS  
2d Session

**H. R. 4624**

[Report No. 1364]

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# **A BILL**

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To consolidate and revise the laws relating to the Public Health Service, and for other purposes.

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By Mr. BULWINKLE

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APRIL 18, 1944

Referred to the Committee on Interstate and Foreign  
Commerce

APRIL 20, 1944

Committed to the Committee of the Whole House on  
the state of the Union and ordered to be printed







Sec. 9. Any company or any agent or broker guilty of violating any of the provisions of this act shall be subject to the provisions of sections 3 and 36, respectively, and, as may be amended, of chapter II, Public, No. 824, Seventy-sixth Congress, known as the Fire and Casualty Act, approved October 9, 1940 (54 Stat. 1066 and 1079; D. C. Code, 1940 ed., title 35, secs. 1306 and 1340).

Sec. 10. All laws or parts of laws, insofar as they relate to business affected hereby and in conflict with any of the provisions of this act, are hereby repealed.

Sec. 11. Should any section or provision of this act be decided by the courts to be unconstitutional or invalid, the validity of the act as a whole, or of any part thereof, other than the part decided to be unconstitutional, shall not be affected.

Mr. RANDOLPH. Mr. Speaker, I offer an amendment.

The Clerk read as follows:

Mr. RANDOLPH moves to strike out all after the enacting clause and insert the following: "That in this act, unless the context otherwise requires—

" 'District' means the District of Columbia;

" 'Superintendent' means the Superintendent of Insurance of the District of Columbia;

" 'Company' means any insurer, whether stock, mutual, reciprocal, interinsurer, Lloyd's, or any other form or group of insurers;

" 'Agent' means and shall include any individual, copartnership, or corporation acting in the capacity of or licensed as a 'policy-writing agent,' 'soliciting agent,' or 'salaried company employee,' as defined under section 3, chapter I, of the Fire and Casualty Act, approved October 9, 1940 (54 Stat. 1064; D. C. Code, 1940 ed., title 35, sec. 1303); and

" 'Broker' means any person who for a consideration acts or aids in any manner in the solicitation or negotiation on behalf of the assured of contracts of insurance."

Sec. 2. The provisions of this act shall apply to insurance in the District of Columbia against loss of or damage to property or any valuable interest therein by or as a consequence of fire, lightning, tornado, windstorm, and explosion, or any one or more of such hazards, including all supplemental, additional, or extended forms of coverage written in connection with fire insurance, and including any policy which insures property, while it is at a permanent location, against the hazard of fire, lightning, tornado, windstorm, or explosion; but this act shall not apply to ocean marine, transportation, boiler and machinery, or motor-vehicle insurance, nor to insurance covering the property of interstate common carriers, nor to any form of insurance designated by the Superintendent as inland marine insurance.

Sec. 3. The Superintendent is empowered to investigate the necessity for an adjustment of the rates on any or all risks or classes of risks within the scope of this act, and to order an adjustment of such rates whenever he determines, after investigation of the experience showing premiums and losses for a period of not less than 5 years next preceding such investigation, that the rates for any one or more classes of risks are excessive, inadequate, or unreasonable. In determining the necessity for an adjustment of rates, the Superintendent shall give consideration to all factors reasonably attributable to the risks, to the conflagration or catastrophe hazard, both within and without the District, and to a reasonable profit. The Superintendent is also empowered, after investigation, to order removed, at such time and in such manner as he shall specify, any unfair discrimination existing between individual risks or classes of risks.

Any person, firm, or corporation aggrieved by any order, ruling, proceeding, or action of the Superintendent, or any person acting in his behalf and at his instance, may appeal

to the Commissioners of the District, or contest the validity of such order, ruling, proceeding, or action in any court of competent jurisdiction by appeal or through any other appropriate proceedings, as provided under sections 44 and 45, chapter II, Public, Numbered 824, Seventy-sixth Congress, known as the Fire and Casualty Act, approved October 9, 1940 (54 Stat. 1082; D. C. Code, 1940 ed., title 35, secs. 1348 and 1349).

Sec. 4. Within 120 days after the approval of this act and under the supervision of the Superintendent, the insurance companies authorized to effect insurance in the District against the risk of loss or damage by hazards within the scope of this act shall organize a rating bureau for the purpose of administering rates for such insurance, and all such companies now or hereafter authorized to transact such business in the District shall be members of such bureau. The government of the rating bureau shall be vested in its members and it shall not be subject to the direction or control of any other bureau, association, corporation, company, individual, or group of individuals. The rating bureau shall have power to establish reasonable agreements and bylaws for its governance, and shall be permitted to adopt reasonable rules and regulations necessary to carry out its functions, but such agreements, bylaws, rules, and regulations shall not be inconsistent with the provisions of this act, and the same and amendments thereto shall be approved by the Superintendent before becoming effective. The rating bureau, subject to the approval of the Superintendent, shall apportion the expenses of its operation among its members in proportion to the premium income on risks in the District.

Sec. 5. No company, agent, or broker shall issue or deliver, or offer to issue or deliver, or knowingly permit the issuance or delivery of, any policy of insurance in the District which does not conform to the requirements approved by the Superintendent: *Provided, however,* That a company may deviate from such requirements if the company has filed with the rating bureau and with the Superintendent the deviation to be applied, and provided such deviation is approved by the Superintendent. If approved, the deviation shall remain in force for a period of 1 year from the date of approval by the Superintendent, unless such approval is withdrawn by the Superintendent for cause after notice to the insurer, or withdrawn by the insurer with the approval of the Superintendent.

It is further provided that a rate in excess of that promulgated by the rating bureau may be charged, provided such higher rate is charged with the knowledge and written consent of the insured and the Superintendent.

Sec. 6. The rating bureau shall keep a record of all rates, schedules, and proceedings. Every agent shall keep a record of every policy contract issued by or through his agency.

Sec. 7. The superintendent, his deputy, or duly authorized examiner, is authorized and empowered to examine all records of the rating bureau, companies, and agents, and to require every company to furnish statistical reports of premiums and losses in such form and according to such classifications as the Superintendent shall prescribe and any other information which the Superintendent may deem necessary for the administration of this act. The Superintendent may require the rating bureau to consolidate the reports of classified experience.

Sec. 8. No rate, premium, schedule, rating method, rule, bylaw, agreement, or regulation shall become effective or be charged, applied, or enforced in the District by the rating bureau, or by any company, agent, or broker governed by the provisions of this act, until it shall have been first filed with

and approved by the Superintendent: *Provided,* That a rate or premium used or charged in accordance with a schedule, rating method, or rule previously approved by the Superintendent need not be specifically approved by the Superintendent. No company, agent, or broker shall issue any form of policy, clause, warranty, rider, or endorsement until such form shall have been filed with and approved by the Superintendent.

Sec. 9. Any company or any agent or broker guilty of violating any of the provisions of this act shall be subject to the provisions of sections 3 and 36, respectively, and as may be amended, of chapter II, Public, No. 824, Seventy-sixth Congress, known as the Fire and Casualty Act, approved October 9, 1940 (54 Stat. 1066 and 1079; D. C. Code, 1940 ed., title 35, secs. 1306 and 1340).

Sec. 10. All laws or parts of laws, insofar as they relate to business affected hereby and in conflict with any of the provisions of this act, are hereby repealed.

Sec. 11. Should any section or provision of this act be decided by the courts to be unconstitutional or invalid, the validity of the act as a whole, or of any part thereof, other than the part decided to be unconstitutional, shall not be affected.

Mr. RANDOLPH. Mr. Speaker, I may say that the amendment constitutes the House bill as amended.

The SPEAKER. The question is on the amendment.

The amendment was agreed to.

The bill was ordered to be read a third time, was read the third time, and passed.

A motion to reconsider and a similar House bill (H. R. 3974) were laid on the table.

#### EXTENDING REDUCED RATES OF INTEREST ON FEDERAL LAND BANK AND LAND BANK COMMISSIONER LOANS

Mr. SABATH. Mr. Speaker, by direction of the Committee on Rules I file a privileged report on the bill (H. R. 4102) to extend for 2 additional years the reduced rates of interest on Federal land bank and Land Bank Commissioner loans (Rept. No. 1495).

Mr. Speaker, I may say that the gentleman from Kentucky was to have filed this rule, but unfortunately he is absent on account of important business. I want the House to know that he is extremely interested in this legislation. I feel further that it may be taken up tomorrow. That is the reason I am filing it today.

The Clerk read as follows:

*Resolved,* That immediately upon the adoption of this resolution it shall be in order to move that the House resolve itself into the Committee of the Whole House on the state of the Union for the consideration of the bill (H. R. 4102) to extend for 2 additional years the reduced rates of interest on Federal land bank and land-bank commissioner loans. That after general debate, which shall be confined to the bill and shall continue not to exceed 1 hour to be equally divided and controlled by the chairman of the ranking minority member of the Committee on Agriculture, the bill shall be read for amendment under the 5-minute rule. At the conclusion of the reading of the bill for amendment, the committee shall rise and report the same to the House with such amendments as shall have been adopted and the previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit.



The SPEAKER. Referred to the House Calendar and ordered printed.

**CONSOLIDATION AND REVISION OF LAWS RELATING TO THE PUBLIC HEALTH SERVICE**

Mr. SABATH. Mr. Speaker, I call up House Resolution 555, for immediate consideration.

The Clerk read as follows:

*Resolved*, That immediately upon the adoption of this resolution it shall be in order to move that the House resolve itself into the Committee of the Whole House on the state of the Union for the consideration of the bill (H. R. 4624) to consolidate and revise the laws relating to the Public Health Service, and for other purposes. That after general debate, which shall be confined to the bill and shall continue not to exceed 2 hours to be equally divided and controlled by the chairman and the ranking minority member of the Committee on Interstate and Foreign Commerce, the bill shall be read for amendment under the 5-minute rule. At the conclusion of the reading of the bill for amendment, the Committee shall rise and report the same to the House with such amendments as may have been adopted, and the previous question shall be considered as ordered on the bill and amendments there-to to final passage without intervening motion except one motion to recommit.

Mr. SABATH. Mr. Speaker, later I shall yield 30 minutes to the gentleman from Ohio [Mr. BROWN]. I make this statement now so he will understand I am not going to try to deprive him of the usual time.

Mr. Speaker, this rule makes in order H. R. 4624, a very important bill coming from the Committee on Interstate and Foreign Commerce under the leadership of the gentleman from North Carolina [Mr. BULWINKLE]. The gentleman from North Carolina and members of his subcommittee have given months and months of study to this restatement of the laws relating to the Public Health Service. The full committee has unanimously reported this bill.

The bill would bring together in a compact and orderly arrangement substantially all existing law on the subject except obsolete laws and resolve certain ambiguities in existing law and make a number of revisions which operating experience has shown to be necessary or desirable in connection with the Public Health Service. Little or nothing has been done on this line since 1878.

I want to congratulate the gentleman from North Carolina and his subcommittee upon the splendid work they have done. Nearly everybody I have contacted about the bill states that it is in the right direction, that he endorses the bill and urges early and favorable consideration, and this I hope it will receive.

The committee has filed a comprehensive report. I want to compliment the gentleman from North Carolina upon complying so completely with the Ramseyer rule, for the report gives full and complete information as to the various changes and modifications that are embodied in this bill. There are a few changes in present law. Some of the acts were passed over a hundred years ago and need modification and clarification. The committee has done this and has liberalized many of the provisions.

The bill contains one provision which I feel it important to call to your attention and that is the authorization of \$20,000,000 as against the former \$11,000,000 as grants to the States for general public health work. These grants to various States will be made in accordance with the demonstrated needs and the justifications made. In view of the splendid work that has been rendered the country by the Federal Government in connection with public health, and especially in view of the great interest of this administration, particularly the President, in safeguarding the health of our people, which is near and dear to the President's heart, I believe that authorization also should be approved and the bill should be passed.

I do not wish to detain the House because the chairman of the subcommittee and the gentlemen who drafted the bill are here and ready to make further and fuller explanation of the provisions of this rather long—it contains 94 pages—bill. In view of that I shall yield to the gentleman from North Carolina [Mr. BULWINKLE] such of the time remaining to me as he desires after first yielding 30 minutes to the gentleman from Ohio [Mr. BROWN].

Mr. Speaker, I reserve the remainder of my time.

Mr. Speaker, I ask unanimous consent to revise and extend the remarks I made earlier in the day.

The SPEAKER. Without objection, it is so ordered.

There was no objection.

Mr. BROWN of Ohio. Mr. Speaker, as the able chairman of the Committee on Rules has explained, House Resolution 555 makes in order the bill H. R. 4624, to consolidate and revise the laws relating to the Public Health Service, and for other purposes.

It also waives certain provisions of the Ramseyer rule made necessary because of the fact H. R. 4624 repeals a number of obsolete sections of the statutes and because it would be confusing and costly to attempt to print in the original text of this bill all of the various sections that have been repealed.

For some time there has been evidence of a great need for the consolidation of the public-health laws into one act so that there may be one central authority for the functioning of the Public Health Service. This bill has been carefully considered by the Interstate and Foreign Commerce Committee of the House and by a subcommittee thereof and has the unanimous support and endorsement of every agency of the Government interested in public-health matters. It has also the support and recommendation of all the various State agencies of the United States interested in public-health affairs.

We had before us the representatives of the various medical and other public-health associations, as well as representatives of various Government agencies, and I am firmly convinced that both the subcommittee and the full Committee on Interstate and Foreign Commerce of the House have done an excellent piece of work in preparing this legislation for the consideration of the House.

Mr. JENKINS. Will the gentleman yield for a question?

Mr. BROWN of Ohio. I yield to the gentleman from Ohio.

Mr. JENKINS. The gentleman knows very well that there is a natural fear among the medical profession of the Nation in reference to the Government's encroachment upon the province of the medical men. Has there been any opposition interposed anywhere by medical men to this bill?

Mr. BROWN of Ohio. No; with the exception that the committee membership just a day or so ago received a communication from a representative of the dental association. However, that matter has been or will easily be cleared up because of the fact that while a change has been made in one section of the law the bill also makes a change in another section and that leaves dentists in exactly the same position they were prior to the passage of this act, or perhaps even in a better position.

Mr. JENKINS. I have had some little experience with the Public Health Service, especially in connection with floods and certain calamities. I have found that it has been a great organization, it has done a great work, but also everyone owes an allegiance to the medical profession of this country, and we should not impose upon them any unnecessary restrictions that will invade their profession or rights.

Mr. BROWN of Ohio. Let me say to the gentleman from Ohio that in considering this legislation both the officials of the Public Health Service and the membership of the subcommittee, and I happen to be a member of that subcommittee as well as a member of the Rules Committee, were very careful to make certain that we in no way invaded the field of private medical practice. We did, in this measure, content ourselves only with a service as far as public health is concerned that can be called a real public service. In other words, we have not extended the activities or the range of authority of the Public Health Service further than now pertains except in one or two instances where there have been new developments. For instance, we have given them authority over some new alkaloids and some new drugs that have been discovered that are habit-forming, and which were not mentioned in the old law. We have given them some additional authority, for instance, in employing consultants who are not citizens of this country. Those consultants are being employed and used in foreign ports and in foreign stations where, because of the war, the Public Health Service must today function; and we have given them, by that particular section, the right and authority to go anywhere in the world and get as aids, or assistants and consultants, anyone who may have special knowledge of some tropical disease, let us say, that we in America have had no experience with whatsoever; yet, in order to save American lives it is necessary that we get the benefit of the knowledge that these men in foreign countries may have.

Mr. DONDERO. Will the gentleman yield?



Mr. BROWN of Ohio. I yield to the gentleman from Michigan.

Mr. DONDERO. Does this come with a unanimous report to the House?

Mr. BROWN of Ohio. It is a unanimous report.

Mr. DONDERO. Was the medical profession called in and consulted in the preparation of this legislation?

Mr. BROWN of Ohio. The medical profession and different representatives and groups appeared or had an opportunity to be heard. I want to be entirely fair in reference to this. As I mentioned a moment ago, the Dental Association was invited and, as I understand it, did not appear, but later wrote a letter pointing out that in one section of the redrafted bill, or the clean bill, as we call it, the dental profession as a profession had been deleted or stricken out of the law. However, we pointed out to that association that in another section the same authority that they now have and the same rights that they now enjoy have been protected.

Mr. ROBSION of Kentucky. Will the gentleman yield?

Mr. BROWN of Ohio. I yield to the gentleman from Kentucky.

Mr. ROBSION of Kentucky. Did the committee have representatives of the American Medical Association before it?

Mr. BROWN of Ohio. Yes; we extended an opportunity to be heard to the representatives of all the different branches of medicine.

Mr. ROBSION of Kentucky. They approved it?

Mr. BROWN of Ohio. Yes; as I understand it, they did. May I ask the chairman of the subcommittee to answer that?

Mr. BULWINKLE. The chairman of the legislative committee of the Public Health Association appeared. There was no opposition at all from anyone in the medical profession.

Mr. ROBSION of Kentucky. Did anyone representing the American Medical Association appear?

Mr. BULWINKLE. They had notice of it. May I say to the gentleman from Kentucky that this is not a curative bill. The Public Health Service is organized to prevent the spread of contagious and other diseases in the United States. It does not, as the gentleman from Ohio said, take one thing away from the medical profession which it now has.

Mr. BROWN of Ohio. This is not for the regulation of the private practice of medicine in any way. As I understood it, Dr. Riley and these other gentlemen who appeared are officers of the American Medical Association, and they are satisfied.

Mr. ROBSION of Kentucky. The bill does not infringe on private practice?

Mr. BULWINKLE. Not in the least.

Mr. ROBSION of Kentucky. How about the hospitals? Is there any report on that? Did anybody appear?

Mr. BULWINKLE. Yes.

Mr. ROBSION of Kentucky. Did anyone representing the hospitals express any opposition?

Mr. BULWINKLE. No; not in the least.

Mr. JENSEN. Will the gentleman yield?

Mr. BROWN of Ohio. I yield to the gentleman from Iowa.

Mr. JENSEN. Does this bill seek to change any present laws relative to the veterans or their wives or dependents?

Mr. BROWN of Ohio. Oh, no, it does not touch veterans' legislation or veterans' hospitals except that there is a provision, and I wish to be corrected if I am wrong, that in foreign ports, where there are hospital facilities of the Public Health Service, a veteran is entitled to emergency service at those hospitals where he cannot get to a veterans' hospital quickly.

Mr. JENSEN. The gentleman thinks that is the only place?

Mr. BROWN of Ohio. Yes; there is no infringement on the administration of veterans law in any way. Let me say there is only an added help provided for veterans at any time they call on the Public Health Service.

Mr. SMITH of Ohio. Will the gentleman yield?

Mr. BROWN of Ohio. I yield to the gentleman from Ohio.

Mr. SMITH of Ohio. Referring to page 28 and the grants and services to States. I read section 314 very carefully and it seems to me this is a rather heavy encroachment by the Federal Government upon the States.

Mr. BROWN of Ohio. Of course, that is simply a reenactment of the present law.

Mr. SMITH of Ohio. I understand the present law. There is, for example, the control of venereal disease. Is that a State function or a Federal function? I think it is a State function.

Mr. BROWN of Ohio. I can agree with the gentleman very quickly that it is a State function, primarily; but this does not attempt, if the gentleman will read the section carefully, to control venereal disease within a State. It is only for the purpose of developing more effective measures for the prevention, treatment, and control of venereal disease, and not to carry out the actual cure thereof. It is only to experiment, conduct research, furnish information, and give help as may be called for by the States.

Mr. SMITH of Ohio. We all know what it means when the Federal Government says those things. It means the Federal Government is going in and take charge.

Mr. BROWN of Ohio. Let me say that all of the State health departments and the various local health officials of the different States of the Union have a different viewpoint than that expressed by the gentleman from Ohio, Dr. SMITH, because each and every one of them has approved this bill. They call upon the Federal Health Service only in the case of epidemics, and for information on research and experimentation conducted in the central hospitals or facilities of the Public Health Service.

Mr. SMITH of Ohio. Would not the gentleman expect those health officers to approve this measure. But what I want to know is where the individual physician or the individual citizen stands on this proposition.

Mr. BROWN of Ohio. Of course, I cannot answer for what the gentleman may have in his mind. Let me say again

that this provision is simply an extension of the present law. We have codified only this particular provision of the present law on that subject, and your discourse goes back to whether or not the original law should have been enacted, not as to whether it should be recodified. In other words, if this bill is defeated, the law on this particular subject will remain just the same as it is today, or, if it is passed, the present law will not be changed.

Mr. SMITH of Ohio. But there might be this difference. In this instance certainly more funds are going to be granted.

Mr. BROWN of Ohio. Slightly more because of the feeling that there will be a greater health problem during the next few years as we reconvert millions of men from the Army and the Navy back to civilian life; many of them coming back with malaria, or other tropical diseases, so there will be more help needed by the local health boards and communities than in the past. Federal expenditures are still under the control of the Congress, and appropriations must be made by the Congress for any amounts that are used for Public Health Service purposes.

Mr. SMITH of Ohio. The one point I would like to make is that it costs the State much less money to control venereal diseases than it does the Federal Government.

Mr. BROWN of Ohio. The Federal Government does not attempt to control venereal diseases, except as it makes ready for use of the private physician, and of the State and local health authorities, such information as it may obtain through its research and other work in the field of venereal diseases.

Mr. SMITH of Ohio. This says, in so many words, to enable the Surgeon General to carry out the purposes of section 301 with respect to developing more effective measures for the prevention, treatment, and control of venereal diseases.

Mr. BROWN of Ohio. With respect to developing more effective measures for the prevention thereof, certainly. They find some new way to control the disease, and they pass that information on.

Mr. SMITH of Ohio. Will the gentleman admit that there is now a tendency on the part of the Federal Government to encroach upon the States?

Mr. BROWN of Ohio. Certainly; and there has been no man in this House who has been more zealous in protecting the rights of the States and the local communities against encroachment from the Federal Government than I, with the possible exception of the gentleman who addresses me, Dr. SMITH of Ohio.

Mr. AUGUST H. ANDRESEN. Mr. Speaker, will the gentleman yield?

Mr. BROWN of Ohio. I yield to the gentleman from Minnesota.

Mr. AUGUST H. ANDRESEN. As I understand it, in this bill you have written existing law. I would like to ask the gentleman this question: Is there anything in this bill that might authorize the socialization of medicine?

Mr. BROWN of Ohio. No; just directly the opposite, in my opinion.



Mr. SABATH. Mr. Speaker, I yield to the gentleman from North Carolina [Mr. BULWINKLE] 10 minutes.

Mr. BULWINKLE. Mr. Speaker, as was so well stated by the gentleman from Ohio and the chairman of the Committee on Rules, this is a bill to revise and consolidate the public-health laws. The public-health laws date back originally to the old maritime laws, which provided maritime hospitalization in 1792. There really has not been a consolidation or codification of the public-health laws since 1875. A great many laws have been enacted by amendments to appropriation bills.

Several years ago a subcommittee of the Committee on Interstate and Foreign Commerce introduced a bill, but we found that in some particulars it merely overlapped what was already in existing law. In order to have the law before us, and in order to do away with and repeal all these obsolete laws, the committee then started to work, with the aid of the legislative counsel of the House and of the Federal Security Administration, to revise all the laws relating to public health.

I may say that there are no great changes in existing law. The only change that has been made, as I said, is the repeal of the obsolete sections and rationalizing inconsistent provisions, resolving doubts and ambiguities in existing law and making certain revisions that are found necessary by long administrative experience.

So I say that the entire bill was carefully gone over. I have never seen any men more conscientious than the gentleman from Ohio [Mr. BROWN], the gentleman from Tennessee [Mr. REECE], the gentleman from Pennsylvania [Mr. SCOTT], the gentleman from Tennessee [Mr. PRIEST], and the gentleman from Pennsylvania [Mr. MYERS], who were present practically all the time at the hearings when we went over this matter.

The first bill was introduced in October. When the hearings were held, notice was sent to everyone. I am saying this because I want to call to your attention that in two particulars the committee will introduce committee amendments, one of which I feel—and I know the gentleman from Ohio feels the same way—should be enacted. We had practically stated that one amendment would be put in the bill, as applied to the shipping on the Great Lakes, and that is the word "primarily."

The other is on page 14, line 12, to insert the word "pharmacist" after the words "sanitary engineering officers."

If there is any question that any Member wishes to ask, if I am able to do so, I will be glad to answer.

Mr. KEEFE. Mr. Speaker, will the gentleman yield?

Mr. BULWINKLE. I yield to the gentleman from Wisconsin.

Mr. KEEFE. Will the gentleman explain those two amendments again?

Mr. BULWINKLE. The first amendment that will be offered is on page 2, line 19, in the definition of "seamen." The definition of "seamen" as now construed is with the word "primarily" omitted. After some hearings we de-

cided or thought we had better place that in there, on account of the fact that in some instances there are men on board vessels who are not seamen, who would come under the provisions of this act, and who only had a temporary position on board. The shipping people on the Great Lakes said that this would affect them. Mr. BROWN and I practically told them we would agree to take it out, but we overlooked it, and for that reason I am asking, when the time comes, that we be permitted to do that. There was no objection at all at the time of the hearings. The State health authorities were all present, and the Members of the Congress spoke to me, as did the gentleman from Wisconsin, about amendments which we saw fit to place in the bill.

The second amendment was the pharmacist field on page 14, line 11, "commissioned officers other than medical, dental, and sanitary engineering officers shall be promoted in accordance with regulations of the President." We felt that they should be classed with these others. It does not make any material difference, and so we agreed to put them in.

Mr. KEEFE. As I understand, the second amendment relates to the inclusion of a pharmacist.

Mr. BULWINKLE. Yes.

Mr. KEEFE. In the provision to be found in paragraph 4, on page 14.

Mr. BULWINKLE. Yes.

Mr. Speaker, I yield back the remainder of my time.

Mr. BROWN of Ohio. Mr. Speaker, I yield 5 minutes to the gentleman from Ohio [Mr. ROWE].

Mr. ROWE. Mr. Speaker, I ask unanimous consent to speak out of order.

The SPEAKER. Is there objection to the request of the gentleman from Ohio? There was no objection.

Mr. ROWE. Mr. Speaker, I want to call the attention of the House to certain conditions that are now coming into existence which I deem to be of serious proportions. In order to obtain more milk, a No. 1 food item in the United States, this Congress, together with the administration, first paid subsidies to milk producers that we might have it in greater amount. In addition to that, those who are interested in conserving the food of the country issued certain directives and orders that only a certain percentage of the milk used last year could be used this year in the same manner. As a result of that the country now probably enjoys the greatest milk flush it has ever enjoyed in the history of the Nation.

Mr. BROWN of Ohio. Mr. Speaker, will the gentleman yield?

Mr. ROWE. Yes; I will be glad to yield.

Mr. BROWN of Ohio. Did I understand the gentleman to say that Congress had authorized milk subsidies?

Mr. ROWE. I say, Congress and the administration.

Mr. BROWN of Ohio. Congress, of course, did not authorize milk subsidies. If I am correct, in fact we voted against all subsidies on foods three or four different times, but our bills prohibiting

subsidies were vetoed and we did not have a sufficient majority to pass such legislation over the President's veto. But at all times the majority of Congress has been on record against the payment of any subsidies on food.

Mr. ROWE. I am glad to have the gentleman's contribution. I am not particularly interested in fixing the blame as to who may be responsible excepting for the condition in which we find ourselves now. I do not know whether the Congress may be blamed for granting the power which the administration has to do this under the laws that have been passed. However, the condition does exist. The result now is, as I said before, that the country enjoys the greatest milk flush it has ever had in its history. The problem is, What is happening to this excess flow of milk, this abundant flow of milk that is coming on the market at the present time?

Mr. AUGUST H. ANDRESEN. Mr. Speaker, will the gentleman yield?

Mr. ROWE. I will be glad to yield.

Mr. AUGUST H. ANDRESEN. The gentleman knows that a good deal of milk is being dumped in the gutter throughout the country, and the principal reason for that is because of a New Deal agency order prohibiting the delivery which would make possible the use of the milk in the country.

Mr. ROWE. I expect to come to that very condition, sir, and I am glad to have the gentleman's contribution. Let me read to you a news item from a Youngstown, Ohio, paper which reads as follows:

#### DAIRIES FORCED TO DUMP MILK

YOUNGSTOWN.—Two Youngstown dairies, the Smith Dairy Co. and the Isaly Dairy Co., dumped 1,500 gallons of milk Tuesday because they do not have the facilities to dry or condense it and under Government orders are not permitted to increase milk sales or use the milk for byproducts.

J. H. Heintzelman, of the Smith Dairy, said his firm has been dumping 500 gallons of milk daily for 6 weeks. Walter Paulo, general manager of Isaly's, said the 1,000 gallons had accumulated in the last few days.

Government regulations, the two men say, limit dairies in the amount of milk that can be sold and also limits the amount that can be used for byproducts—ice cream, cottage cheese, and other articles.

Mr. JENKINS. Mr. Speaker, will the gentleman yield?

Mr. ROWE. I yield.

Mr. JENKINS. Did the gentleman say that is Youngstown, Ohio?

Mr. ROWE. Yes.

Mr. JENKINS. That is not very far from where the gentleman lives.

Mr. ROWE. About 40 miles.

Mr. JENKINS. Let me say to the gentleman I think I saw that same item in the paper. It comes under the A. P. date line, does it not?

Mr. ROWE. That is right.

Mr. JENKINS. That is the same item the gentleman has, it has an Associated Press date line?

Mr. ROWE. This is an item of the Associated Press. It is not dated here. But probably in the paper it is.

In addition to that, on May 15, 1944, I received a communication from the most



populous city in the district I represent, which reads as follows:

THE REITER DAIRY Co.,  
Akron, Ohio, May 15, 1944.

HON. EDMUND ROWE,  
United States Congressman,  
House Office Building,  
Washington, D. C.

DEAR MR. ROWE: Yesterday we ran 200 gallons of skim milk down the sewer and today it will be at least 1,000 gallons down the sewer. It looks as though it will be at least that much daily until the flush is over, which will be about the 1st of July.

With the shortage of help I do not believe we will be able to skim that much milk and then we will have to run whole milk down the sewer.

Maybe Mr. Stitts or Marvin Jones can tell us a way out, we don't know. With this subsidy, what else would you expect together with the price we are forced to pay the farmer; he sure is and can turn out the stuff, but the sad story is there are areas like this one where there are insufficient manufacturing facilities to handle such a flood of milk. What can we do?

Very truly yours.

The SPEAKER. The time of the gentleman from Ohio has expired.

Mr. BROWN of Ohio. Mr. Speaker, I yield 2 minutes to the gentleman from Ohio.

Mr. MURRAY of Wisconsin. Mr. Speaker, will the gentleman yield?

Mr. ROWE. I yield.

Mr. MURRAY of Wisconsin. It seems to me that the War Food Administrator and the O. D. T. and O. P. A. should set up a program whereby it should not be necessary to see any of these products wasted. They assuredly have the authority to work this out, but it seems there is altogether too much divided authority. It is regrettable that this good food is being wasted at this time.

Mr. ROWE. Let me bring this to your attention as forcefully as I can. The Ohio Dairy Association saw this flush season coming. They went before the person who has the power to allocate sugar in their attempt to convert sweet whole milk into condensed sweetened milk. When they appeared as an association before this bureaucrat, they told him that they wanted additional sugar for this purpose. He asked what was the purpose. They said to save the flush milk, the No. 1 food product of this country. I am told he drummed on the desk with his pencil and he said, "That is not enough." By reason of the restrictive orders preventing the use of milk still continuing into a time when we have a very flush season, we now are in the unacceptable and unhealthy position of dumping this No. 1 food product down the sewer, as is indicated by these articles I have read. They may, as you say, issue an order to prevent them from dumping the milk. But because there is not an over-all estimation of what will result from their effort in creating an abundance of food and in anticipating its proper use, it is destroyed. This is further evidence of our bureaucratic bungling.

The SPEAKER. The time of the gentleman from Ohio has again expired.

Mr. BROWN of Ohio. Mr. Speaker, I yield to the gentleman from Oregon [Mr. ANGELL] such time as he may require.

(By unanimous consent, Mr. ANGELL received permission to revise and extend his remarks on two subjects and include certain excerpts.)

#### PORTLAND AERO CLUB CELEBRATE ITS TWENTY-FIFTH ANNIVERSARY

Mr. ANGELL. Mr. Speaker, on May 3 last the Portland Aero Club of my State and district celebrated its twenty-fifth anniversary. It is one of the most active clubs promoting the aviation program in the United States. The objectives of the club were well summed up at the banquet in these words:

Aviation is everybody's business. It is properly of concern not only to aviation enthusiasts but to the community as a whole—to civic leaders, businessmen, educators, parents, and all who are alive to the needs of the day.

There is one large and important group in the country whose interests in aviation is already such that it needs no stimulating. This is the younger generation in the land. All children, even the youngest, are interested in planes \* \* \*, who make them and who fly them. This generation of air-minded youth does not, as we say, need stimulating. But it does need help. The Aero Club of Oregon dedicates its time and its facilities to giving this help in every way possible.

Our colleague the gentleman from West Virginia [Mr. RANDOLPH], who has been an outstanding friend and supporter of aviation, favored our city with his presence at this celebration.

Mr. Speaker, as a part of my remarks, I include an article appearing in the National Aeronautics in its May 1944 issue, as follows:

#### PORTLAND'S JUBILEE—HOW A GROUP OF FIRST WAR FLYERS BECAME AN AVIATION FORCE AND A CIVIC CENTER

Most of Portland, Oreg., is quite conscious of the fact that the city's aviation enthusiasts are celebrating the twenty-fifth anniversary of their Aero Club this month. The citizenry know that the Portland Aero Club happens to be the center of city and State aviation activity, and the fixed point to which all aviation celebrities naturally gravitate whenever they come within a few hundred miles.

And those who aren't interested in aviation, a very few, of course, know about the anniversary because an incidental accomplishment of the Aero Club is the setting of one of the best tables on the northwest coast. Which in itself is an achievement for an organization that began in the days when airmen lived off hamburger.

The men who formed the club in May 1919, were a group of returned World War No. 1 aviators, who didn't have jobs anyway. Pledging themselves to stand together for mutual benefit in the development of aviation in Oregon, the group of war birds elected Milton Klepper as president and Clarence Eubanks as secretary, and named William Pearson, L. R. Mullineaux, R. C. Barnes, Seth French, and D. C. Warren as directors.

#### THOSE FLYING CIRCUSES

From the very outset air-mindedness was the slogan of the organization. Commercial aviation companies were formed, flying circuses were held throughout the State, and many other pioneer steps taken to promote interest in flying.

During the first 7 years, membership was restricted to ex-servicemen who had been connected with aviation. Then, with the realization that commercial aviation was fast becoming more important than past war flying, the club was reorganized and the by-

laws amended to permit anyone with the interest of aviation at heart to become a member. Among those active in this reorganization were L. L. Adcox, J. G. "Tex" Rankin, Noel B. Evans, James I. Gordon, Arthur McKenzie, and Larry Therkelsen.

In 1927, with increased public interest receiving a new impetus from the transoceanic flights of Lindbergh and others, the need for affiliation with a national body was seen and Aero Club members formed the Portland Chapter of the National Aeronautic Association.

Under that banner the club took a leading part in the development of commercial aviation. Aeronautical legislation, air-mail routes, and transport lines were sponsored. Outstanding in these efforts was Pacific Air Transport. This company, one of the first transport air lines in the country, was organized in Portland with the Aero Club taking the principal role in gaining backing for the enterprise.

The club has had other projects. It has on occasion sent representatives of its own to Washington to help bring the Army air establishments to Oregon. At home, it sold the local folk on the development of the large Portland air base, also known as the Portland Columbia Airport.

The club was consulted in the appointment of the State board of aeronautics, and through this source, has been able to promote and advocate the expansion of airport systems throughout all of Oregon.

#### NORTHWEST PLANNING COUNCIL

Still a comparatively small group, the club in 1936 took the lead in awaking the Northwest as a whole to the problems and possibilities of aviation. As a result, the Northwest Aviation Planning Council—comprising five Western States, two Provinces of Canada, and Alaska—has met twice yearly ever since.

These many activities were carried on with meetings being held in hotel rooms or borrowed clubrooms—any place a meeting could be held without expense. In 1935, Harry K. Coffey, now one of the country's outstanding sportsman pilots and active in the Civil Air Patrol as a lieutenant colonel and coordinating officer out of Washington, Dr. Raymond Staub, Col. B. K. Lawson, the late Maj. Howard C. French, and others, underwrote the purchase of a modern club home in the central part of metropolitan Portland. This building, formerly the headquarters of the Knights of Columbus, houses one of the finest clubs in the country. Included are a regular marine room with a modern swimming pool, massage, hot room, steam room, and lamp room.

#### THE "AERODROME"

The first floor consists of a lounge and hangar, while the second floor is given over to a spacious dining room. The "Aerodrome," located on the third floor, is one of the most colorful cocktail lounges on the Pacific coast—a bar at one end, beautiful staircases, mirrors, bright interior decorating, upholstered seats, and luxurious carpeting. A modern gymnasium is on the fourth floor with facilities for all kinds of athletics.

While today, with a world at war, the activities of the club are concerned mainly with the promotion of the Civil Air Patrol and plans for post-war aviation on the Pacific coast, the nostalgic memories of the club's earlier days are still conversation whenever a few of the old-timers gather in the hangar.

They will tell you about how Will Rogers and Wiley Post were entertained at dinner, how the inimitable Will "wisecracked" that he would send back some ice for the cocktail bar that wouldn't melt while speakers introduced each other—and how just 2 days later Rogers and Post crashed to their deaths near Point Barrow, Alaska.

And then another member will tell about Tex Rankin, one of the real pioneers of aviation, and how he worked and struggled to



keep the Aero Club a jump or so ahead of the creditors. Although Tex Rankin is now a lot of jumps ahead of the creditors himself—he's president and moving force of the Rankin Aeronautical Corporation at Tulare, Calif.—he is still a member of the club, and visits his alma mater at every opportunity.

Hap Arnold, now chief of the United States Army Air Forces, was an enthusiastic counsellor and regular visitor at the Aero Club while stationed at Vancouver Barracks. General Westover, General Arnold's predecessor as head of the Air Forces, was guest of honor at a meeting the evening before his death in an air crash in California.

#### PAST PRESIDENTS

Among Aero Club presidents during a quarter of a century were the late Governor of Oregon, Julius L. Meier, L. L. Adcox, Sydney V. W. Peters, Larry Therkelsen, Lt. Basil B. Smith, Capt. L. B. Hickam, Maj. Howard C. French, and George L. Sammis.

Portland and the entire Pacific Northwest is justly proud of its Aero Club and its efforts in behalf of the Civil Air Patrol for the youth of the Nation.

fifth birthday on May 3 the Aero Club At the banquet commemorating its twenty-summed up its credo in these words:

"Aviation is everybody's business. It is properly of concern not only to aviation enthusiasts but to the community as a whole—to civic leaders, businessmen, educators, parents, and all who are alive to the needs of the day.

"There is one large and important group in the country whose interests in aviation is already such that it needs no stimulating. This is the younger generation in the land. All children, even the youngest, are interested in planes \* \* \* who make them and who fly them. This generation of air-minded youth does not, as we say, need stimulating. But it does need help. The Aero Club of Oregon dedicates its time and its facilities to giving this help in every way possible."

Mr. BROWN of Ohio. Mr. Speaker, I yield 5 minutes to the gentleman from Minnesota [Mr. AUGUST H. ANDRESEN].

#### INTERNATIONAL MONETARY CONFERENCE

Mr. AUGUST H. ANDRESEN. Mr. Speaker, I am taking this time to call to the attention of Congress and the country to the decision of the President to call an international monetary conference in the near future without first submitting the proposed international monetary plan to Congress for approval.

Some days ago our colleague the gentleman from Illinois [Mr. DEWEY] presented a plan to the Committee on Foreign Affairs, proposing to give aid in the reconstruction of the post-war world to needy people. Mr. White, the Under Secretary of the Treasury, who is the author of a new international finance plan, appeared against Mr. DEWEY's bill because, he said, if such legislation was enacted into law to aid the people of foreign countries, it would be a disappointment to the financial experts from those countries. Now it appears that the financial experts from 43 nations have come to the United States or have been called in individually by the Secretary of the Treasury and have agreed to a plan which they propose to put into operation. It is called the International Stabilization Fund, having a capital of \$8,000,000,000, a large share of which is to be contributed by the American people. This scheme has not been considered by Congress.

Now, I have insisted that Congress should pass upon this important question before the President calls his international monetary conference. I submitted such a request to the chairman of one of the committees which would have charge of part of this legislation, and he refuses to call a meeting of our committee. I think it is our duty to pass upon a matter of this importance which seeks to commit our country, before the administration calls in the other nations of the world and makes promises which may never be carried out or agreed to by Congress. It is now quite apparent we will not get the details, secret and otherwise, of the so-called Treasury monetary plan and that the President will call this conference and commit the United States to a program of international financing involving billions of dollars of the American people's money before Congress passes upon the merits of the plan.

After the international monetary conference has agreed, then the President will come before Congress with his agreed plan to finance the world with a message stating: "Now, I have committed the United States," the President will say, "to finance the world with the American people's money and you in Congress will have to pass it or you will disappoint the financial experts in the other countries of the world and you will also disappoint the other people in the world who are expecting financial aid from the United States."

Mr. JONKMAN. Mr. Speaker, will the gentleman yield?

Mr. AUGUST H. ANDRESEN. I yield.

Mr. JONKMAN. Is that not just the process followed in U. N. R. R. A.?

Mr. AUGUST H. ANDRESEN. Exactly.

Mr. JONKMAN. In other words, before the United States becomes a signatory to the agreement or to whatever you want to call it, the only way Congress can give its consent is by furnishing the funds or withholding them?

Mr. AUGUST H. ANDRESEN. That is right. And the same plan will be put into operation with the establishment of the international monetary fund and the international reconstruction bank and other similar agencies. But I want to point out that the far-reaching effect of these international monetary schemes go much further than the U. N. R. R. A., because the agencies created to handle the money of the world will also control the economy of every country in the world. Now it happens, and I am sure most of you know it, that an international board of directors will control the affairs and fix the policies of the international bank that is to be created. It happens that the majority, in fact all others except the United States, who will be on this board of directors owe the United States money. They will fix the policy on what is to be done and we will have to abide by it or get out of it, and then we will be left out of world trade. I say that Congress should consider this legislation before the President has his international monetary conference. To do otherwise may jeopardize the future welfare of our country. The Americans expect their Congress to protect them.

The SPEAKER. The time of the gentleman from Minnesota has expired.

Mr. SABATH. Mr. Speaker, I yield 3 minutes to the gentleman from Wisconsin [Mr. KEEFE].

Mr. KEEFE. Mr. Speaker, I take this time to pay a well deserved tribute to the members of this Committee on Interstate and Foreign Commerce, which has submitted the recodification of the laws relative to the Public Health Service. I want the record to show that as one who was extremely interested in the recodification of the Public Health Service laws I found this committee to be receptive to every reasonable suggestion that could be offered that would improve the Public Health Service, and especially provide for the maintenance of the Federal-State relationship between the Federal Public Health Service and the State Public Health Service.

As a member of the subcommittee on appropriations which furnishes appropriations for the Federal Security Agency and the Public Health Service, which is a part of and under the general jurisdiction of the Federal Security Agency, I want to say that I know of no agency in this Government that is doing a finer piece of work and that is headed by finer men who are devoted to the public service than the men who are giving their lives to the service of their country in the public-health work. I know of no man that has greater confidence of the committee that I have the honor to serve than General Parran, who heads the Public Health Service of this country.

Mr. H. CARL ANDERSEN. Mr. Speaker, will the gentleman yield?

Mr. KEEFE. I yield.

Mr. H. CARL ANDERSEN. I simply want to corroborate the statement of the gentleman in regard to the high opinion which our committee has of these high public officials he has just mentioned.

Mr. KEEFE. I thank the gentleman.

I am pleased to note that the committee has provided in this consolidation for a minimum authorization of \$20,000,000 to provide for the venereal-disease-control program of this country. Under existing law the Committee on Appropriations is limited to an appropriation of \$11,000,000. The result has been that the Public Health Service, in cooperation with the States, has been compelled to go to other sources to get the necessary funds with which to carry on the effective work of this program during the World War. So we have seen a rather divided authority in the matter of handling these funds. Part of the funds have been provided through the regular appropriating agency—the Appropriations Committee—and the Public Health Service has had to have almost an equal amount of its appropriation supplied from the so-called Lanham Act funds. I am glad that this authorization has been increased under the provisions of this law so that the Public Health Service can come to the regular committee of Congress—the Appropriations Subcommittee—and can there present justification for their entire program. This is a fine step in the right direction, and the Appropriations Committee will have in one place a codification of public-



health laws that are applicable to various items of appropriation that annually come before the subcommittee for attention.

The SPEAKER. The time of the gentleman from Wisconsin has expired.

Mr. SABATH. Mr. Speaker, naturally, I am gratified to hear gentlemen on the Republican side give due credit to the United States Public Health Service. I agree with them that it is headed by a splendid gentleman and a man of great professional and organizational ability, Dr. Parran. That activity has rendered a really beneficial service to the country. Under this bill I hope it will continue to carry out the plans and purposes of the administration so as to be of the greatest possible help to the people of the whole country.

Of course, once in a while we hear charges of bureaucrats, but whenever we appropriate public money that is divided among the various States there is no objection, as I have observed. It is gratifying to me that once in a while we do not hear these charges of bureaucrats when the money is so nicely and broadly and liberally given to the States, to aid the States in carrying on functions which rightly belong to the States at their own expense. I have no objection to that. I am in favor of anything that will help people in any section of the country.

#### MILK ALLEGEDLY DESTROYED

Answering the gentleman from Ohio [Mr. BROWN] as to alleged disposition of milk, the gentleman has called attention to the amount of milk that is being destroyed. I regret it, because only a few days ago we had a bill here which would enable the poor children in various sections of our country to obtain these lunches and some of this milk. Unfortunately, many gentlemen, or most of you on the Republican side, voted against it. The bill is coming back here. I think the conferees have agreed on an amount provided, against which there was opposition; and that report will be before us tomorrow, and I hope that these gentlemen, in view of the great oversupply of milk, will see the light and vote for the conference report, which will give these children school lunches and milk which is being destroyed in many sections of Ohio, so the gentleman from Ohio states.

Mr. BROWN of Ohio. Mr. Speaker, will the gentleman yield?

Mr. SABATH. I yield.

Mr. BROWN of Ohio. I wonder if the gentleman from Illinois [Mr. SABATH] would not agree with me that instead of destroying this milk that has already been paid for, it might be a better idea to just give it to the children without passing any legislation to buy additional milk when you already have paid for some. I think we could save money both ways, and I know the gentleman is very much in favor of saving money.

Mr. SABATH. I wonder why we, instead of pouring this milk into the sewers, could not have given it to the poor children. I know that, notwithstanding the country is prosperous, we still have some poor children of widows and children of those who are serving our Nation that could have been benefited to a great extent if this milk had

been given to them instead of being poured into the sewer.

Mr. AUGUST H. ANDRESEN. Will the gentleman yield?

Mr. SABATH. I yield.

Mr. AUGUST H. ANDRESEN. With reference to milk, this concern that dumped the milk into the sewer did not have cool storage space to keep it in, and one of these bureaucratic agencies of the O. D. T. would not let them deliver it on that day.

Mr. SABATH. I thank the gentleman, who is an expert in dairying, for his observation. If they did not have storage space, the milk could have soured, and sour milk is more healthful than sweet milk.

Furthermore, they could have made cheese or butter out of this milk; the Government agency would not have stopped them from doing that. I think it is merely done for the purpose of giving to the country real knowledge that there is a surplus of milk; and I am glad of it, because some months ago certain gentlemen claimed there was a terrific shortage of milk, and that we must grant subsidies for the farmers and the dairymen of this country else they would be ruined. Some gentlemen from New York brought in here a placard showing that some dairies were going to be sold. I then called attention to the fact that they were going to be sold because the price the farmer was getting for his stock was so much greater than he had paid for it that he is making a handsome profit, and he will simply put the money in his jeans and go and live in the future without the necessity of managing a dairy. In view of all these facts, I hope these gentlemen from the dairy sections, like the gentleman from Wisconsin [Mr. KEEFE] will not in the future cry and plead and urge subsidies and subsidies for the "poor" dairy farmers. I maintain that farmers generally are more prosperous today under Democratic administration than they have ever been. God bless them. I am glad of it; but why should they insist upon such a high price for milk and cream and cheese that we poor people in the cities are obliged to use? I cannot understand it.

Mr. KEEFE. Mr. Speaker, will the gentleman yield?

Mr. SABATH. This afternoon, as soon as I am through, I am going to call up the O. P. A. to learn why it continues to pay subsidies to these dairy farmers and refuses to allow the use of milk and cream for the manufacture of ice cream and cheese and other things that are much needed. To that extent, I agree with the gentleman.

Mr. KEEFE. Will the gentleman yield at that point?

Mr. SABATH. Yes; to you. Of course, I never can refuse to yield to the industrious gentleman from Wisconsin.

Mr. KEEFE. I thank the handsome and distinguished gentleman from Illinois. But may I call his attention to this situation, and suggest to him that when he calls up the O. P. A. this afternoon he also ask what orders have been put out by the O. P. A. that have precipitated the very situation that the gen-

tleman from Ohio referred to this morning.

The gentleman will find out if he gets the facts that a quota order on a base period has been issued by the O. P. A. which restricts the plants processing milk to 75 percent, I believe, of its production during the base period; and the operator will be sent to jail and fined or both if he tries to manufacture that milk or if he attempts to distribute it to his customers beyond the amount fixed during the base period. So that milk goes down the sewer by virtue of that order and for no other reason.

Mr. SABATH. All right; I thank the gentleman for his explanation, but there is no law I can find or no order issued that I know of that would preclude them from giving this milk to the poor children.

Mr. ROWE. They cannot dispose of it.

Mr. SABATH. Yes; they can. I know something about it. There is nothing in the law that would preclude them from giving that milk to poor, needy people, giving all the surplus they may have—and there is plenty of surplus not only of milk but of other farm products, in view of labor and other aids given the farms; that is what I wanted to learn.

I fully appreciate that some things are done by O. P. A. that should not be done. Many months ago I called attention to some of their regulations, but I was under the impression that lately since we have a Republican at the head of it and 85 percent of the people who are issuing these orders are Republicans, that we finally had reached real orderly procedure; instead, however, things are getting worse. I know they, nevertheless, will endeavor to correct, after experience, any mistakes of omission or commission.

Mr. KEEFE. Mr. Speaker, will the gentleman yield?

Mr. SABATH. No; I cannot.

Mr. Speaker, I move the previous question on the rule.

The previous question was ordered.

The resolution was agreed to.

Mr. BULWINKLE. Mr. Speaker, I ask unanimous consent that the bill (H. R. 4624) to consolidate and revise the laws relating to the Public Health Service, and for other purposes, be considered in the House as in the Committee of the Whole.

The SPEAKER. Is there objection to the request of the gentleman from North Carolina?

There was no objection.

The Clerk read the title of the bill.

The Clerk read the bill, as follows:

*Be it enacted, etc.*

#### TITLE I—SHORT TITLE AND DEFINITIONS

##### SHORT TITLE

SECTION 1. Titles I to V, inclusive, of this act may be cited as the "Public Health Service Act."

##### DEFINITIONS

SEC. 2. When used in this act—

(a) The term "Service" means the Public Health Service;

(b) The term "Surgeon General" means the Surgeon General of the Public Health Service;

(c) The term "Administrator" means the Federal Security Administrator;

(d) The term "regulations," except when otherwise specified, means rules and regula-



tions made by the Surgeon General with the approval of the Administrator;

(e) The term "executive department" means any executive department, agency, or independent establishment of the United States or any corporation wholly owned by the United States;

(f) The term "State" means a State or the District of Columbia, Hawaii, Alaska, Puerto Rico, or the Virgin Islands, except that as used in section 361 (d) such term means a State, the District of Columbia, or Alaska;

(g) The term "possession" includes, among other possessions, Puerto Rico and the Virgin Islands;

(h) The term "seamen" includes any person employed on board primarily in the care, preservation, or navigation of any vessel, or in the service, on board, of those engaged in such care, preservation, or navigation;

(i) The term "vessel" includes every description of watercraft or other artificial contrivance used, or capable of being used, as a means of transportation on water, exclusive of aircraft and amphibious contrivances;

(j) The term "habit-forming narcotic drug" or "narcotic" means opium and coca leaves and the several alkaloids derived therefrom, the best known of these alkaloids being morphia, heroin, and codeine, obtained from opium, and cocaine derived from the coca plant; all compounds, salts, preparations, or other derivatives obtained either from the raw material or from the various alkaloids; Indian hemp and its various derivatives, compounds, and preparations, and peyote in its various forms; and

(k) The term "addict" means any person who habitually uses any habit-forming narcotic drug so as to endanger the public morals, health, safety, or welfare, or who is or has been so far addicted to the use of such habit-forming narcotic drugs as to have lost the power of self-control with reference to his addiction.

## TITLE II—ADMINISTRATION

### PUBLIC HEALTH SERVICE

SEC. 201. The Public Health Service in the Federal Security Agency shall be administered by the Surgeon General under the supervision and direction of the Administrator.

### ORGANIZATION

SEC. 202. The Service shall consist of (1) the Office of the Surgeon General, (2) the National Institute of Health, (3) the Bureau of Medical Services, and (4) the Bureau of State Services. The Surgeon General is authorized and directed to assign to the Office of the Surgeon General, to the National Institute of Health, to the Bureau of Medical Services, and to the Bureau of State Services, respectively, the several functions of the Service, and to establish within them such divisions, sections, and other units as he may find necessary; and from time to time abolish, transfer, and consolidate divisions, sections, and other units and assign their functions and personnel in such manner as he may find necessary for efficient operation of the Service. No division shall be established, abolished, or transferred, and no divisions shall be consolidated, except with the approval of the Administrator. The National Institute of Health shall be administered as a part of the field service. The Surgeon General may delegate to any officer or employee of the Service such of his powers and duties under this act, except the making of regulations, as he may deem necessary or expedient.

### COMMISSIONED CORPS

SEC. 203. There shall be in the Service a commissioned Regular Corps and, for the purpose of securing a reserve for duty in the Service in time of national emergency, a Reserve Corps. All commissioned officers shall be citizens and shall be appointed without regard to the civil-service laws and com-

pensated without regard to the Classification Act of 1923, as amended. Commissioned officers of the Reserve Corps shall be appointed by the President and commissioned officers of the Regular Corps shall be appointed by him by and with the advice and consent of the Senate. Commissioned officers of the Reserve Corps shall at all times be subject to call to active duty by the Surgeon General, including active duty for the purpose of training and active duty for the purpose of determining their fitness for appointment in the Regular Corps. All active service in the Reserve Corps, as well as service in the Regular Corps, shall be credited for the purpose of promotion in the Regular Corps.

### SURGEON GENERAL

SEC. 204. The Surgeon General shall be appointed from the Regular Corps for a 4-year term by the President by and with the advice and consent of the Senate. Upon the expiration of such term the Surgeon General, unless reappointed, shall revert to the grade and number in the Regular Corps that he would have occupied had he not served as Surgeon General.

### DEPUTY SURGEON GENERAL AND ASSISTANT SURGEONS GENERAL

SEC. 205. (a) The Surgeon General shall assign one commissioned officer from the Regular Corps to administer the Office of the Surgeon General, to act as Surgeon General during the absence or disability of the Surgeon General or in the event of a vacancy in that office, and to perform such other duties as the Surgeon General may prescribe, and while so assigned he shall have the title of Deputy Surgeon General.

(b) The Surgeon General shall assign six commissioned officers from the Regular Corps to be, respectively, the Director of the National Institute of Health, the Chief of the Bureau of State Services, the Chief of the Bureau of Medical Services, the Chief Medical Officer of the United States Coast Guard, the Chief Dental Officer of the Service, and the Chief Sanitary Engineering Officer of the Service, and while so serving they shall each have the title of Assistant Surgeon General.

(c) The Surgeon General shall designate the Assistant Surgeon General who shall serve as Surgeon General in case of absence or disability, or vacancy in the offices, of both the Surgeon General and the Deputy Surgeon General.

### GRADES, RANKS, AND TITLES OF THE COMMISSIONED CORPS

SEC. 206. (a) The Surgeon General, during the period of his appointment as such, shall be of the same grade, with the same pay and allowances, as the Surgeon General of the Army; and the Deputy Surgeon General and Assistant Surgeons General, while assigned as such, shall have the grade corresponding with the grade of Brigadier General, with the same pay and allowances. The grades of commissioned officers of the Service shall correspond with grades of officers of the Army as follows:

- (1) Officers of the director grade—colonel;
- (2) Officers of the senior grade—lieutenant colonel;
- (3) Officers of the full grade—major;
- (4) Officers of the senior assistant grade—captain;
- (5) Officers of the assistant grade—first lieutenant; and
- (6) Officers of the junior assistant grade—second lieutenant.

(b) The titles of medical officers of the foregoing grades shall be respectively (1) medical director, (2) senior surgeon, (3) surgeon, (4) senior assistant surgeon, (5) assistant surgeon, and (6) junior assistant surgeon. The President is authorized to prescribe titles, appropriate to the several grades, for commissioned officers of the Service other than medical officers. All titles of the officers of

the Reserve Corps shall have the suffix "Reserve."

### SPECIAL TEMPORARY POSITIONS

SEC. 207. (a) When necessary for the accomplishment of important temporary work in time of war, or of emergency proclaimed by him, the President may establish special temporary positions in the Service and prescribe grades which shall be applicable to officers during periods they are assigned to such positions. While assigned to any such position an officer shall receive the pay and allowances applicable to the grade so prescribed. Not more than three such positions existing at any one time shall have the grade of Assistant Surgeon General. The Surgeon General shall assign commissioned officers to such positions.

(b) Commissioned officers and qualified technical or professional noncommissioned personnel may be assigned by the Surgeon General to be chiefs of administrative units. Such assignments shall not affect the pay of commissioned officers so assigned, except that when any commissioned officer below the grade of director is assigned to serve as chief of a division such officer during the period so assigned shall have the temporary grade and receive the pay and allowances applicable to the director grade.

### APPOINTMENT OF PERSONNEL

SEC. 208. (a) (1) Except as provided in subsection (b) of this section, original appointments to the Regular Corps may be made only in the junior assistant, assistant, and senior assistant grades and original appointments to a grade above junior assistant shall be made only after passage of an examination, given in accordance with regulations of the President, in one or more of the several branches of medicine, surgery, dentistry, hygiene, sanitary engineering, pharmacy, or related scientific specialties in the field of public health.

(2) Original appointments to the Reserve Corps may be made to any grade up to and including the director grade but only after passage of an examination given in accordance with regulations of the President. Reserve commissions shall be for a period of not more than 5 years and any such commission may be terminated by the President at any time, in his discretion.

(b) Whenever commissioned officers of the Service are not available for the performance of permanent duties requiring highly specialized training and experience in special fields related to public health, the Administrator on recommendation of the Surgeon General shall report that fact to the President and the President is authorized to appoint, by and with the advice and consent of the Senate, not to exceed three persons in any one fiscal year to grades in the Regular Corps of the Service above that of senior assistant, but not to a grade above that of director; and for purposes of pay and pay period any person appointed under the provisions of this section shall be considered as having had on the date of appointment service equal to that of the junior officer of the grade to which appointed.

(c) In accordance with regulations, special consultants may be employed to assist and advise in the operations of the Service. Such consultants may be appointed without regard to the civil-service laws and their compensation may be fixed without regard to the Classification Act of 1923, as amended.

(d) In accordance with regulations, individual scientists, other than commissioned officers of the Service, may be designated by the Surgeon General to receive fellowships, appointed for duty with the Service without regard to the civil-service laws and compensated without regard to the Classification Act of 1923, as amended, may hold their fellowships under conditions prescribed therein, and may be assigned for studies or investiga-



tions either in this country or abroad during the terms of their fellowships.

(e) Persons who are not citizens may be employed as consultants pursuant to subsection (c) and may be appointed to fellowships pursuant to subsection (d). Unless otherwise specifically provided, any prohibition in any other act against the employment of aliens, or against the payment of compensation to them, shall not be applicable in the case of persons employed or appointed pursuant to such subsections.

(f) The appointment of any officer or employee of the Service made in accordance with the civil-service laws shall be made by the Administrator, and may be made effective as of the date on which such officer or employee enters upon duty.

#### PAY AND ALLOWANCES

SEC. 209. (a) Commissioned officers of the Regular Corps shall receive such pay and allowances as are or may hereafter be provided by law.

(b) Reserve officers shall receive the same pay and allowances when on active duty as commissioned officers of the Regular Corps, including allowances for travel and transportation of household goods and effects.

(c) In accordance with regulations of the President, commissioned officers of the Regular Corps and officers of the Reserve on active duty may make allotments from their pay and may be granted leaves of absence without any deduction from their pay. Such officers shall also be permitted to purchase quartermaster supplies from the Army, Navy, and Marine Corps at the same price as is charged officers of the Army, Navy, and Marine Corps.

(d) Female commissioned officers of the Service shall receive the same pay and allowances as male officers of corresponding grades, including allowances for dependents, except that no allowance shall be paid to any female commissioned officer on account of any dependent who is not in fact dependent upon such officer for his or her chief support. For the purposes of this subsection the term "dependent" shall include a husband, father, mother, and unmarried children (including stepchildren and adopted children) under 21 years of age.

(e) Members of the National Advisory Health Council and members of the National Advisory Cancer Council, other than ex officio members, while attending conferences or meetings of their respective councils or while otherwise serving at the request of the Surgeon General, shall be entitled to receive compensation at a rate to be fixed by the Administrator, but not exceeding \$25 per diem, and shall also be entitled to receive an allowance for actual and necessary traveling and subsistence expenses while so serving away from their places of residence.

(f) Field employees of the Service, except those employed on a per diem or fee basis, who render part-time duty and are also subject to call at any time for services not contemplated in their regular part-time employment, may be paid annual compensation for such part-time duty and, in addition, such fees for such other services as the Surgeon General may determine; but in no case shall the total paid to any such employee for any fiscal year exceed the amount of the minimum annual salary rate of the classification grade of the employee.

(g) Whenever any commissioned or other officer or employee of the Service is assigned for duty which the Surgeon General finds requires intimate contact with persons afflicted with leprosy, he may receive, as provided by regulations of the President, in addition to the pay and any allowances of his grade, not more than one-half the pay of such grade, and such allowances or increased allowances as may be provided for by such regulations.

(h) Individuals appointed under section 208 (d) shall have included in their fellow-

ships such stipends or allowances, including travel and subsistence expenses, as the Surgeon General may deem necessary to procure qualified fellows.

#### PROMOTIONS AND SEPARATION OF COMMISSIONED OFFICERS IN THE REGULAR CORPS

SEC. 210. (a) Promotions of commissioned officers of the Regular Corps to any grade up to and including the director grade shall be made only after examination given in accordance with regulations of the President and shall be made according to the same length of service as is now or may hereafter be prescribed for promotion of officers of corresponding grades of the Medical Corps of the Army, except that—

(1) In time of war, or of national emergency proclaimed by the President, any commissioned officer of the Regular Corps may be appointed to a higher temporary grade with the pay and allowances thereof without examination and without vacating his permanent appointment, and, if his service shall have been continuous, without renewing his oath of office;

(2) For purposes of promotion, an officer whose original appointment to the Regular Corps was above the assistant grade shall be considered as having had on the date of such original appointment service equal to that of the junior officer of the grade to which he was appointed, except that if his active commissioned service in the Service exceeds that of the junior officer of the grade, such service (not exceeding 10 years for an officer appointed in the senior assistant grade and 14 years for an officer appointed in the full grade) shall be credited for purposes of promotion;

(3) Officers commissioned in the grade of junior assistant shall be examined for promotion after not more than 2 years of service and if qualified shall be promoted to the next higher grade; and

(4) Commissioned officers other than medical, dental, and sanitary engineering officers shall be promoted in accordance with regulations of the President.

(b) At the end of his first 3 years of service, the record of each commissioned officer in the Regular Corps originally appointed in or above the grade of senior assistant shall be reviewed in accordance with regulations of the President and if found not fully qualified for further service he shall be separated from the Service and paid 6 months' pay and allowances.

(c) When a commissioned officer in the Regular Corps is found, after examination, to be not qualified for promotion for reasons other than physical disability incurred in line of duty—

(1) If below the full grade he shall be separated from the Service, and if in the assistant grade he shall be separated and paid 6 months' pay and allowances, and if in the senior assistant grade he shall be separated and paid 1 year's pay and allowances; and

(2) If in the full or senior grade he shall be reported as not in line of promotion, or shall be retired and paid at the rate of 2½ percent for each complete year of active commissioned service in the Service, but in no case to exceed 60 percent of his active pay at the time he is retired.

#### RETIREMENT OF COMMISSIONED OFFICERS

SEC. 211. (a) A commissioned officer of the Regular Corps retired for disability from disease or injury incurred in line of duty, or a commissioned officer of the Reserve Corps retired for disability from disease or injury incurred in line of duty in time of war, shall be entitled, except as provided in subsection (c), to receive retired pay at the rate of 75 percent of his active pay at the time of retirement.

(b) A commissioned officer shall be retired on the first day of the month following his sixty-fourth birthday. If he is an officer in the Regular Corps, he shall, except as pro-

vided in subsection (c), be entitled to receive retired pay at the rate of 75 percent of his active pay at the time of retirement.

(c) (1) Any commissioned officer of the Regular Corps who at the time of his original appointment was more than 45 years of age shall upon retirement, unless retired for disability from disease or injury incurred in time of war, be entitled to retired pay only at the rate of 4 percent of his active pay at the time of retirement for each 12 months of active commissioned service, including any such service in the Army, Navy, or Coast Guard, but in no case more than 75 percent of such active pay.

(2) The retired pay of any commissioned officer who has served 4 years or more as Surgeon General or Deputy Surgeon General shall be based on the pay of the highest grade held by him as such Surgeon General or Deputy Surgeon General.

(3) The retired pay of an officer of the Regular Corps who has failed, by reason of disability incurred in line of duty, to receive a promotion to which he would otherwise have been entitled, shall be based on the pay of the grade to which, but for such disability, he would have been promoted.

(d) An officer retired for disability who is found to have recovered from his disability, and in time of war an officer who has been retired for age, may in accordance with regulations of the President be recalled to active duty.

(e) With the approval of the President, a commissioned officer who has served 4 years or more as Surgeon General and who has had not less than 25 years of active commissioned service in the Service may retire voluntarily, either at the termination of his term as Surgeon General or at any time thereafter; and his retired pay shall be at the rate of 75 percent of the pay of the highest grade held by him as such Surgeon General.

(f) Commissioned officers of the Reserve Corps, while on active duty, shall be deemed to be officers of the executive branch of the Government within the meaning of section 8 of the Civil Service Retirement Act, as amended (U. S. C., 1940 ed., title 5, sec. 693).

#### MILITARY BENEFITS

SEC. 212. (a) For the purposes of this section—

(1) the term "full military benefits" means all rights, privileges, immunities, and benefits provided under any law of the United States in the case of commissioned officers of the Army (including their surviving beneficiaries) on account of active military service, including, but not limited to, burial payments in the event of death, 6 months' pay in case of death, veterans' compensation and pensions and other veterans' benefits, the rights provided under the Soldiers' and Sailors' Civil Relief Act, as amended, and under the National Service Life Insurance Act, as amended, travel allowances, including per diem allowances for travel without regard to repeated travel between two or more places in the same vicinity, exemption from payment of postage on mail, exemption of certain pay from Federal income taxation, and other benefits, privileges, and exceptions under the Internal Revenue laws; excluding, however, retired pay, uniform allowances, the right to be awarded military ribbons, medals, and decorations, and the benefits of the Mustering-Out Payment Act of 1944, and excluding reemployment rights with respect to any commissioned officer of the Service except officers of the Reserve Corps called to active duty after November 11, 1943; and

(2) the term "limited military benefits" means full military benefits, except veterans' compensation and pension and other veterans' benefits, and eligibility under the National Service Life Insurance Act, as amended.

(b) Commissioned officers of the Service (including their surviving beneficiaries)—



(1) shall be entitled to limited military benefits with respect to all active service in time of war;

(2) shall be entitled to full military benefits with respect to active service performed while detailed for duty with the Army, Navy, or Coast Guard;

(3) shall be entitled to full military benefits with respect to active service outside the continental limits of the United States, or in Alaska, in time of war;

(4) shall be entitled to full military benefits with respect to active service performed while the Service is part of the military forces of the United States pursuant to Executive order of the President.

(c) The authority vested by law in the War Department, the Secretary of War, or other officers of the War Department with respect to rights, privileges, immunities, and benefits referred to in subsection (a) shall be exercised, with respect to commissioned officers of the Service, by the Surgeon General under the supervision and direction of the Administrator.

(d) The President may prescribe the conditions under which commissioned officers of the Service may be awarded military ribbons, medals, and decorations.

#### ALLOWANCES FOR UNIFORMS

SEC. 213. An allowance of \$250 for uniforms and equipment is authorized to be paid to each commissioned officer of the Service who is hereafter, in time of war, appointed to the Regular Corps or called to active duty in the Reserve Corps, or who is hereafter on active duty in either corps at the commencement of any war, if at such time the officer is in the grade of junior assistant, assistant, or senior assistant, and is receiving the pay of the first, second, or third pay period; except that no officer who has received such an allowance from the Service shall at any time thereafter be entitled to any further allowance.

#### DETAIL OF PERSONNEL

SEC. 214. (a) The Administrator is authorized, upon the request of the head of an executive department, to detail officers or employees of the Service to such department for duty as agreed upon by the Administrator and the head of such department in order to cooperate in, or conduct work related to the functions of such department or of the Service. When officers or employees are so detailed their salaries and allowances may be paid from working funds established as provided by law or may be paid by the Service from applicable appropriations and reimbursement may be made as agreed upon by the Administrator and the head of the executive department concerned. Officers detailed for duty with the Army, Navy, or Coast Guard shall be subject to the laws for the government of the Service to which detailed.

(b) Upon the request of any State health authority, personnel of the Service may be detailed by the Surgeon General for the purpose of assisting such State or a political subdivision thereof in work related to the functions of the Service.

(c) The Surgeon General may detail personnel of the Service to nonprofit educational, research, or other institutions engaged in health activities for special studies of scientific problems and for the dissemination of information relating to public health.

(d) Personnel detailed under subsections (b) and (c) shall be paid from applicable appropriations of the Service, except that, in accordance with regulations such personnel may be placed on leave without pay and paid by the State, subdivision, or institution to which they are detailed. The services of personnel while detailed pursuant to this section shall be considered as having been performed in the Service for purposes of longevity pay, promotion, retirement, compensation for in-

jury or death, and the benefits provided by section 212.

#### REGULATIONS

SEC. 215. (a) The President shall, from time to time prescribe regulations with respect to the appointment, promotion, retirement, termination of commission, titles, pay, uniforms, allowances (including increased allowances for foreign service), and discipline of the commissioned corps of the Service.

(b) The Surgeon General, with the approval of the Administrator, unless specifically otherwise provided, shall promulgate all other regulations necessary to the administration of the Service, including regulations with respect to travel, transportation of household goods and effects, allotments from their pay by commissioned officers, and uniforms for employees, and regulations with respect to the custody, use, and preservation of the records, papers, and property of the Service.

(c) No regulation relating to qualifications for appointment of medical officers or employees shall give preference to any school of medicine.

#### USE OF SERVICE IN EMERGENCY

SEC. 216. In time of war, or of emergency proclaimed by the President, he may utilize the Service to such extent and in such manner as shall in his judgment promote the public interest, and in time of war he may by Executive order declare the commissioned corps of the Service to be a military service. Upon such declaration, and during the period of such war or such part thereof as the President shall prescribe, the commissioned corps (1) shall constitute a branch of the land and naval forces of the United States, and (2) to the extent prescribed by regulations of the President, shall be subject to the Articles of War and to the Articles for the Government of the Navy: *Provided*, That during such period or part thereof the commissioned corps shall continue to operate as part of the Service except to the extent that the President may direct as Commander in Chief.

#### NATIONAL ADVISORY HEALTH AND CANCER COUNCILS

SEC. 217. (a) The National Advisory Health Council shall consist of 14 members. The Director of the National Institute of Health, and three experts, one each from the Army, the Navy, and the Bureau of Animal Industry, to be detailed by the Secretary of War, the Secretary of the Navy, and the Secretary of Agriculture, respectively, shall be ex officio members of the Council. The Surgeon General, with the approval of the Administrator, shall appoint, without regard to the civil-service laws, 10 members of the Council who shall be persons, not otherwise in the employ of the United States, skilled in the sciences related to health. Each appointed member shall hold office for a term of 5 years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term. An appointed member shall not be eligible to serve continuously for more than 5 years but shall be eligible for reappointment if he has not served immediately preceding his reappointment.

(b) The National Advisory Health Council shall advise, consult with, and make recommendations to, the Surgeon General on matters relating to health activities and functions of the Service. The Surgeon General is authorized to utilize the services of any member or members of the Council, and where appropriate, any member or members of the National Advisory Cancer Council in connection with matters related to the work of the Service, for such periods, in addition to conference periods, as he may determine.

(c) The National Advisory Cancer Council shall consist of the Surgeon General ex officio, who shall be Chairman, and of six members

to be appointed without regard to the civil-service laws by the Surgeon General with the approval of the Administrator. The six appointed members shall be selected from leading medical or scientific authorities who are outstanding in the study, diagnosis, or treatment of cancer. Each appointed member shall hold office for a term of 3 years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term. An appointed member shall not be eligible to serve continuously for more than 3 years but shall be eligible for reappointment if he has not served immediately preceding his reappointment.

#### TITLE III—GENERAL POWERS AND DUTIES OF PUBLIC HEALTH SERVICE

##### PART A—RESEARCH AND INVESTIGATIONS

##### In general

SEC. 301. The Surgeon General shall conduct in the Service, and encourage, cooperate with, and render assistance to other appropriate public authorities, scientific institutions, and scientists in the conduct of, and promote the coordination of, research, investigations, experiments, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases and impairments of man, including water purification, sewage treatment, and pollution of lakes and streams. In carrying out the foregoing the Surgeon General is authorized to—

(a) Collect and make available through publications and other appropriate means, information as to, and the practical application of, such research and other activities;

(b) Make available research facilities of the Service to appropriate public authorities, and to health officials and scientists engaged in special study;

(c) Establish and maintain research fellowships in the Service with such stipends and allowances, including traveling and subsistence expenses, as he may deem necessary to procure the assistance of the most brilliant and promising research fellows from the United States and abroad;

(d) Make grants in aid to universities, hospitals, laboratories, and other public or private institutions, and to individuals for such research projects as are recommended by the National Advisory Health Council, or, with respect to cancer, recommended by the National Advisory Cancer Council;

(e) Secure from time to time and for such periods as he deems advisable, the assistance and advice of experts, scholars, and consultants from the United States or abroad;

(f) For purposes of study, admit and treat at institutions, hospitals, and stations of the Service, persons not otherwise eligible for such treatment; and

(g) Adopt, upon recommendation of the National Advisory Health Council, or, with respect to cancer, upon recommendation of the National Advisory Cancer Council, such additional means as he deems necessary or appropriate to carry out the purposes of this section.

##### Narcotics

SEC. 302. (a) In carrying out the purposes of section 301 with respect to narcotics, the studies and investigations shall include the use and misuse of narcotic drugs, the quantities of crude opium, coca leaves, and their salts, derivatives, and preparations, together with reserves thereof, necessary to supply the normal and emergency medicinal and scientific requirements of the United States. The results of studies and investigations of the quantities of crude opium, coca leaves, or other narcotic drugs, together with such reserves thereof, as are necessary to supply the normal and emergency medicinal and scientific requirements of the United States, shall be reported not later than the 1st day of



September each year to the Secretary of the Treasury, to be used at his discretion in determining the amounts of crude opium and coca leaves to be imported under the Narcotic Drugs Import and Export Act, as amended.

(b) The Surgeon General shall cooperate with States for the purpose of aiding them to solve their narcotic drug problems and shall give authorized representatives of the States the benefit of his experience in the care, treatment, and rehabilitation of narcotic addicts to the end that each State may be encouraged to provide adequate facilities and methods for the care and treatment of its narcotic addicts.

#### PART B—FEDERAL-STATE COOPERATION

##### *In general*

SEC. 311. The Surgeon General is authorized to accept from State and local authorities any assistance in the enforcement of quarantine regulations made pursuant to this act which such authorities may be able and willing to provide. The Surgeon General shall also assist States and their political subdivisions in the prevention and suppression of communicable diseases, shall cooperate with and aid State and local authorities in the enforcement of their quarantine and other health regulations and in carrying out the purposes specified in section 314, and shall advise the several States on matters relating to the preservation and improvement of the public health.

##### *Health conferences*

SEC. 312. A conference of the health authorities of the several States shall be called annually by the Surgeon General. Whenever in his opinion the interests of the public health would be promoted by a conference, the Surgeon General may invite as many of such health authorities to confer as he deems necessary or proper. Upon the application of health authorities of five or more States it shall be the duty of the Surgeon General to call a conference of all State and Territorial health authorities joining in the request. Each State represented at any conference shall be entitled to a single vote.

##### *Collection of vital statistics*

SEC. 313. To secure uniformity in the registration of mortality, morbidity, and vital statistics the Surgeon General shall prepare and distribute suitable and necessary forms for the collection and compilation of such statistics which shall be published as a part of the health reports published by the Surgeon General.

##### *Grants and services to States*

SEC. 314. (a) To enable the Surgeon General to carry out the purposes of section 301 with respect to developing more effective measures for the prevention, treatment, and control of venereal diseases, and to assist, through grants and as otherwise provided in this section, States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate measures for the prevention, treatment, and control of such diseases, including the training of personnel for State and local health work, and to enable him to prevent and control the spread of the venereal diseases in interstate traffic, and to meet the cost of pay, allowances, and traveling expenses of commissioned officers and other personnel of the Service detailed to assist in carrying out the purposes of this section with respect to the venereal diseases, and to administer this section with respect to such diseases, there is hereby authorized to be appropriated for each fiscal year a sum sufficient to carry out the purposes of this subsection.

(b) To enable the Surgeon General to assist, through grants and as otherwise provided in this section, States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate public health services, including

grants for demonstrations and for the training of personnel for State and local health work, there is hereby authorized to be appropriated for each fiscal year a sum not to exceed \$20,000,000. Of the sum appropriated for each fiscal year pursuant to this subsection there shall be available an amount, not to exceed \$2,000,000, to enable the Surgeon General to provide demonstrations and to train personnel for State and local health work and to meet the cost of pay, allowances, and traveling expenses of commissioned officers and other personnel of the Service detailed to assist States in carrying out the purposes of this subsection.

(c) For each fiscal year, the Surgeon General, with the approval of the Administrator, shall determine the total sum from the appropriation under subsection (a) and the total sum from the appropriation under subsection (b) which shall be available for allotment among the several States. He shall, in accordance with regulations, from time to time make allotments from such sums to the several States on the basis of (1) population, (2) the size of the venereal-disease problem and the size of other special health problems, respectively, and (3) the financial need of the respective States. Upon making such allotments the Surgeon General shall notify the Secretary of the Treasury of the amounts thereof.

(d) The Surgeon General, with the approval of the Administrator, shall from time to time determine the amounts to be paid to each State from the allotments to such State, and shall certify to the Secretary of the Treasury, the amounts so determined, reduced or increased, as the case may be, by the amounts by which he finds that estimates of required expenditures with respect to any prior period were greater or less than the actual expenditures for such period. Upon receipt of such certification, the Secretary of the Treasury shall, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay in accordance with such certification.

(e) The moneys so paid to any State shall be expended solely in carrying out the purposes specified in subsection (a) or subsection (b) of this section, as the case may be, and in accordance with plans presented by the health authority of such State and approved by the Surgeon General.

(f) Money so paid shall be paid upon the condition that there shall be spent in such State for the same general purpose from funds of such State and its political subdivisions an amount determined in accordance with regulations.

(g) Whenever the Surgeon General, after reasonable notice and opportunity for hearing to the health authority of the State, finds that, with respect to money paid to the State out of appropriations under subsection (a) or subsection (b), as the case may be, there is a failure to comply substantially with either—

- (1) the provisions of this section;
- (2) the plan submitted under subsection (e); or
- (3) the regulations;

the Surgeon General shall notify such State health authority either that further payments will not be made to the State from appropriations under such subsection (or in his discretion that further payments will not be made to the State from such appropriations for activities in which there is such failure), until he is satisfied that there will no longer be any such failure. Until he is so satisfied the Surgeon General shall make no further certification for payment to such State from appropriations under such subsection, or shall limit payment to activities in which there is no such failure.

(h) All regulations and amendments thereto with respect to grants to States under this section shall be made after consulta-

tion with a conference of the State health authorities. Insofar as practicable, the Surgeon General shall obtain the agreement of the State health authorities prior to the issuance of any such regulations or amendments.

(1) Funds appropriated under subsection (a) of this section, in addition to being available for payments to States, shall also be available for expenditure by the Surgeon General in otherwise carrying out such subsection, including expenditures for printing and binding of the findings of investigations, and for pay and allowances and traveling expenses of personnel of the Service engaged in activities authorized by such subsection.

##### *Health education, and information*

SEC. 315. From time to time the Surgeon General shall issue information related to public health, in the form of publications or otherwise, for the use of the public, and shall publish weekly reports of health conditions in the United States and other countries and other pertinent health information for the use of persons and institutions engaged in work related to the functions of the Service.

#### PART C—HOSPITALS, MEDICAL EXAMINATIONS, AND MEDICAL CARE

##### *Hospitals*

SEC. 321. The Surgeon General, pursuant to regulations, shall—

(a) Control, manage, and operate all institutions, hospitals, and stations of the Service, and provide for the care, treatment, and hospitalization of patients, including the furnishing of prosthetic and orthopedic devices;

(b) Provide for the transfer of Public Health Service patients, in the care of attendants where necessary, between hospitals and stations operated by the Service or between such hospitals and stations and other hospitals and stations in which Public Health Service patients may be received, and the payment of expenses of such transfer;

(c) Provide for the disposal of articles produced by patients in the course of their curative treatment, either by allowing the patient to retain such articles or by selling them and depositing the money received therefor to the credit of the appropriation from which the materials for making the articles were purchased; and

(d) Provide for the disposal of money and effects, in the custody of the hospitals or stations, of deceased patients.

##### *Care and treatment of seamen and certain other persons*

SEC. 322. (a) The following persons shall be entitled, in accordance with regulations, to medical, surgical, and dental treatment and hospitalization without charge at hospitals and other stations of the Service:

(1) Seamen employed on vessels of the United States registered, enrolled, and licensed under the maritime laws thereof, other than canal boats engaged in the coasting trade;

(2) Seamen employed on United States or foreign-flag vessels as employees of the United States through the War Shipping Administration;

(3) Seamen, not enlisted or commissioned in the military or naval establishments, who are employed on State school ships or on vessels of the United States Government of more than 5 tons' burden;

(4) Cadets at State maritime academies or on State training ships;

(5) Seamen on vessels of the Mississippi River Commission and, upon application of their commanding officers, officers and crews of vessels of the Fish and Wildlife Service;

(6) Enrollees in the United States Maritime Service on active duty and members of the Merchant Marine Cadet Corps; and

(7) Employees and noncommissioned officers in the field service of the Public Health



Service when injured or taken sick in line of duty.

(b) When suitable accommodations are available, seamen on foreign-flag vessels may be given medical, surgical, and dental treatment and hospitalization on application of the master, owner, or agent of the vessel at hospitals and other stations of the Service at rates fixed by regulations. All expenses connected with such treatment, including burial in the event of death, shall be paid by such master, owner, or agent. No such vessel shall be granted clearance until such expenses are paid or their payment appropriately guaranteed to the collector of customs.

(c) Any person when detained in accordance with quarantine laws, or, at the request of the Immigration and Naturalization Service, any person detained by that Service, may be treated and cared for by the Public Health Service.

(d) Persons not entitled to treatment and care at institutions, hospitals, and stations of the Service may, in accordance with regulations of the Surgeon General, be admitted thereto for temporary treatment and care in case of emergency.

(e) Persons entitled to care and treatment under subsection (a) of this section may, in accordance with regulations, receive such care and treatment at the expense of the Service from public or private medical or hospital facilities other than those of the Service, when authorized by the officer in charge of the station at which the application is made.

#### *Care and treatment of Federal prisoners*

Sec. 323. The Service shall supervise and furnish medical treatment and other necessary medical, psychiatric, and related technical and scientific services, authorized by the act of May 13, 1930, as amended (U. S. C., 1940 ed., title 18, secs. 751, 752), in penal and correctional institutions of the United States.

#### *Examination and treatment of Federal employees*

Sec. 324. The Surgeon General is authorized to provide at institutions, hospitals, and stations of the Service medical, surgical, and hospital services and supplies for persons entitled to treatment under the United States Employees' Compensation Act and extensions thereof. The Surgeon General may also provide for making medical examinations of—

(a) employees of the Alaska Railroad and employees of the Federal Government for retirement purposes;

(b) employees in the Federal classified service, and applicants for appointment, as requested by the Civil Service Commission for the purpose of promoting health and efficiency;

(c) seamen for purposes of qualifying for certificates of service; and

(d) employees eligible for benefits under the Longshoremen's and Harbor Workers' Compensation Act, as amended (U. S. C., 1940 edition, title 33, chapter 18), as requested by any deputy commissioner thereunder.

#### *Examination of aliens*

Sec. 325. The Surgeon General shall provide for making, at places within the United States or in other countries, such physical and mental examinations of aliens as are required by the immigration laws, subject to administrative regulations prescribed by the Attorney General and medical regulations prescribed by the Surgeon General with the approval of the Administrator.

#### *Services to Coast Guard, Coast and Geodetic Survey, and Public Health Service*

Sec. 326. (a) Subject to regulations of the President—

(1) commissioned officers, chief warrant officers, warrant officers, cadets, and enlisted personnel of the Regular Coast Guard, including those on shore duty and those on detached duty, whether on active duty or

retired; and Regular and temporary members of the United States Coast Guard Reserve when on active duty or when retired for disability;

(2) commissioned officers, ships' officers, and members of the crews of vessels of the United States Coast and Geodetic Survey, including those on shore duty and those on detached duty, whether on active duty or retired; and

(3) commissioned officers of the Regular Corps of the Public Health Service, whether on active duty or retired, and commissioned officers of the Reserve Corps when on active duty or when retired for disability; shall be entitled to medical, surgical, and dental treatment and hospitalization by the Service. The Surgeon General may detail commissioned officers for duty aboard vessels of the Coast Guard or the Coast and Geodetic Survey.

(b) Subject to regulations of the President, the dependent members of families (as defined in such regulations) of persons specified in subsection (a), other than temporary members of the United States Coast Guard Reserve, shall be furnished medical advice and out-patient treatment by the Service at its hospitals and relief stations, and they shall also be furnished hospitalization at hospitals of the Service, if suitable accommodations are available, at a per diem cost to the officer, enlisted person, or member of a crew concerned. Such cost shall be at such uniform rate as may be prescribed in such regulations of the President.

(c) The Service shall provide all services referred to in subsection (a) required by the Coast Guard and shall perform all duties prescribed by statute in connection with the examinations to determine physical or mental condition for purposes of appointment, enlistment, and reenlistment, promotion and retirement, and officers of the Service assigned to duty on Coast Guard vessels may extend aid to the crews of American vessels engaged in deep-sea fishing.

#### *Interdepartmental work*

Sec. 327. Nothing contained in this part shall affect the authority of the Service to furnish any materials, supplies, or equipment, or perform any work or services, requested in accordance with section 7 of the act of May 21, 1920, as amended (U. S. C., 1940 edition, title 31, sec. 686), or the authority of any other executive department to furnish any materials, supplies, or equipment, or perform any work or services, requested by the Federal Security Agency for the Service in accordance with that section.

#### *PART D—LEPROSY*

##### *Receipt of lepers*

Sec. 331. The Service shall, in accordance with regulations, receive into any hospital of the Service suitable for his accommodation any person afflicted with leprosy who presents himself for care, detention, or treatment, or who may be apprehended under section 332 or 361 of this act, and any person afflicted with leprosy duly consigned to the care of the Service by the proper health authority of any State, Territory, or the District of Columbia. The Surgeon General is authorized, upon the request of any health authority, to send for any person within the jurisdiction of such authority who is afflicted with leprosy and to convey such person to the appropriate hospital for detention and treatment. When the transportation of any such person is undertaken for the protection of the public health the expense of such removal shall be met from funds available for the maintenance of hospitals of the Service.

##### *Apprehension, detention, treatment, and release*

Sec. 332. The Surgeon General may provide by regulation for the apprehension, detention, treatment, and release of persons being treated by the Service for leprosy.

#### *PART E—NARCOTICS ADDICTS*

##### *Care and treatment*

Sec. 341. The Surgeon General is authorized to provide for the confinement, care, protection, treatment, and discipline of persons addicted to the use of habit-forming narcotic drugs who voluntarily submit themselves for treatment and addicts who have been or are hereafter convicted of offenses against the United States, including persons convicted by general courts martial and consular courts. Such care and treatment shall be provided at hospitals of the Service especially equipped for the accommodation of such patients and shall be designed to rehabilitate such persons, to restore them to health, and, where necessary, to train them to be self-supporting and self-reliant.

##### *Employment of addicts*

Sec. 342. Narcotic addicts in hospitals of the Service designated for their care shall be employed in such manner and under such conditions as the Surgeon General may direct. In such hospitals the Surgeon General may, in his discretion, establish industries, plants, factories, or shops for the production and manufacture of articles, commodities, and supplies for the United States Government. The Secretary of the Treasury may require any Government department, establishment, or other institution, for whom appropriations are made directly or indirectly by the Congress of the United States, to purchase at current market prices, as determined by him or his authorized representative, such of the articles, commodities, or supplies so produced or manufactured as meet their specifications; and the Surgeon General shall provide for payment to the inmates or their dependents of such pecuniary earnings as he may deem proper. The Administrator shall establish a working-capital fund for such industries, plants, factories, and shops out of any funds appropriated for Public Health Service hospitals at which addicts are treated and cared for; and such fund shall be available for the purchase, repair, or replacement of machinery or equipment, for the purchase of raw materials and supplies, for the purchase of uniforms and other distinctive wearing apparel of employees in the performance of their official duties, and for the employment of necessary civilian officers and employees. The Surgeon General may provide for the disposal of products of the industrial activities conducted pursuant to this section, and the proceeds of any sales thereof shall be covered into the Treasury of the United States to the credit of the working-capital fund.

##### *CONVICTS*

Sec. 343. (a) The authority vested with the power to designate the place of confinement of a prisoner shall transfer to hospitals of the Service especially equipped for the accommodation of addicts, if accommodations are available, all addicts who have been or are hereafter sentenced to confinement, or who are now or shall hereafter be confined, in any penal, correctional, disciplinary, or reformatory institution of the United States, including those addicts convicted of offenses against the United States who are confined in State and Territorial prisons, penitentiaries, and reformatories, except that no addict shall be transferred to a hospital of the Service who, in the opinion of the officer authorized to direct the transfer, is not a proper subject for confinement in such an institution either because of the nature of the crime he has committed or because of his apparent incorrigibility. The authority vested with the power to designate the place of confinement of a prisoner shall transfer from a hospital of the Service to the institution from which he was received, or to such other institution as may be designated by the proper authority, any addict whose presence at a hospital of the Service is detrimental to the well-being of



the hospital or who does not continue to be a narcotic addict. All transfers of such prisoners to or from a hospital of the Service shall be accompanied by necessary attendants as directed by the officer in charge of such hospital and the actual and necessary expenses incident to such transfers shall be paid from the appropriation for the maintenance of such Service hospital except to the extent that other Federal agencies are authorized or required by law to pay expenses incident to such transfers. Whenever an alien addict transferred to a Service hospital pursuant to this subsection is entitled to his discharge but is subject to deportation, in lieu of being returned to the penal institution from which he came, he shall be deported by the authority vested by law with power over deportation.

(b) The provisions of the act of June 21, 1902, as amended (U. S. C., 1940 ed., title 18, secs. 710-712a), regulating commutation of sentence for good conduct of United States prisoners, section 8 of the act of May 27, 1930 (U. S. C., 1940 edition, title 18, sec. 744h), regulating commutation of sentence for employment in industry, and the act of June 25, 1910, as amended (U. S. C., 1940 edition, title 18, secs. 714-723c), relating to parole, shall be applicable to any narcotic addict confined in any institution in execution of a judgment or sentence upon conviction of an offense against the United States; except that no narcotic addict confined in any institution, whether or not an institution of the Public Health Service, shall be released by reason of commutation of sentence or parole until the Surgeon General shall have certified that such individual is no longer an addict.

(c) Not later than 1 month prior to the expiration of the sentence of any addict confined in a Service hospital, he shall be examined by the Surgeon General or his authorized representative. If the Surgeon General believes the person to be discharged is still an addict and that he may by further treatment in a Service hospital be cured of his addiction, the addict shall be informed, in accordance with regulations, of the advisability of his submitting himself to further treatment. The addict may then apply in writing to the Surgeon General for further treatment in a Service hospital for a period not exceeding the maximum length of time considered necessary by the Surgeon General. Upon approval of the application by the Surgeon General or his authorized agent, the addict may be given such further treatment as is necessary to cure him of his addiction.

(d) Every person convicted of an offense against the United States, upon discharge, or upon release on parole, from a hospital of the Service, shall be furnished with the gratuities and transportation authorized by law to be furnished to prisoners upon release from a penal, correctional, disciplinary, or reformatory institution.

(e) Any court of the United States having the power to suspend the imposition or execution of sentence and to place a defendant on probation under any existing laws may impose as one of the conditions of such probation that the defendant, if an addict, shall submit himself for treatment at a hospital of the Service especially equipped for the accommodation of addicts until discharged therefrom as cured and that he shall be admitted thereto for such purpose. Upon the discharge of any such probationer from a hospital of the Service, he shall be furnished with the gratuities and transportation authorized by law to be furnished to prisoners upon release from a penal, correctional, disciplinary, or reformatory institution. The actual and necessary expense incident to transporting such probationer to such hospital and to furnishing such transportation and gratuities shall be paid from the appropriation for the maintenance of such hospital except to the extent that other Federal

agencies are authorized or required by law to pay the cost of such transportation: *Provided*, That where existing law vests a discretion in any officer as to the place to which transportation shall be furnished or as to the amount of clothing and gratuities to be furnished, such discretion shall be exercised by the Surgeon General with respect to addicts discharged from hospitals of the Service.

#### Voluntary patients

SEC. 344. (a) Any addict, whether or not he shall have been convicted of an offense against the United States, may apply to the Surgeon General for admission to a hospital of the Service especially equipped for the accommodation of addicts.

(b) Any applicant shall be examined by the Surgeon General who shall determine whether the applicant is an addict, whether by treatment in a hospital of the Service he may probably be cured of his addiction, and the estimated length of time necessary to effect his cure. The Surgeon General may, in his discretion, admit the applicant to a Service hospital. No such addict shall be admitted unless he agrees to submit to treatment for the maximum amount of time estimated by the Surgeon General to be necessary to effect a cure, and unless suitable accommodations are available after all eligible addicts convicted of offenses against the United States have been admitted. Any such addict may be required to pay for his subsistence, care, and treatment at rates fixed by the Surgeon General, and amounts so paid shall be covered into the Treasury of the United States to the credit of the appropriation from which the expenditure for his subsistence, care, and treatment was made.

(d) Any addict admitted for treatment under this section, including any addict, not convicted of an offense, who voluntarily submits himself for treatment, may be confined in a hospital of the Service for a period not exceeding the maximum amount of time estimated by the Surgeon General as necessary to effect a cure of the addiction or until such time as he ceases to be an addict.

(c) Any addict admitted for treatment under this section shall not thereby forfeit or abridge any of his rights as a citizen of the United States; nor shall such admission or treatment be used against him in any proceeding in any court; and the record of his voluntary commitment shall be confidential and shall not be divulged.

#### Penalties

SEC. 345. (a) Any person not authorized by law or by the Surgeon General who introduces or attempts to introduce into or upon the grounds of any hospital of the Service at which addicts are treated and cared for, any habit-forming narcotic drug, weapon, or any other contraband article or thing, or any contraband letter or message intended to be received by an inmate thereof, shall be guilty of a felony and, upon conviction thereof, shall be punished by imprisonment for not more than 10 years.

(b) It shall be unlawful for any person properly committed thereto to escape or attempt to escape from a hospital of the Service at which addicts are treated and cared for, and any such person upon apprehension and conviction in a United States court shall be punished by imprisonment for not more than 5 years, such sentence to begin upon the expiration of the sentence for which such person was originally confined.

(c) Any person who procures the escape of any person admitted to a hospital of the Service at which addicts are treated and cared for, or who advises, connives at, aids, or assists in such escape, or who conceals any such inmate after such escape, shall be punished upon conviction in a United States court by imprisonment in the penitentiary for not more than 3 years.

#### PART F—BIOLOGICAL PRODUCTS

##### Regulation of biological products

SEC. 351. (a) No person shall sell, barter, or exchange, or offer for sale, barter, or exchange in the District of Columbia, or send, carry, or bring for sale, barter, or exchange from any State or possession into any other State or possession or into any foreign country, or from any foreign country into any State or possession, any virus, therapeutic serum, toxin, antitoxin, or analogous product, or arsenamine or its derivatives (or any other trivalent organic arsenic compound), applicable to the prevention, treatment, or cure of diseases or injuries of man, unless (1) such virus, serum, toxin, antitoxin, or other product has been propagated or manufactured and prepared at an establishment holding an unsuspended and unrevoked license, issued by the Administrator as hereinafter authorized, to propagate or manufacture, and prepare such virus, serum, toxin, antitoxin, or other product for sale in the District of Columbia, or for sending, bringing, or carrying from place to place aforesaid; and (2) each package of such virus, serum, toxin, antitoxin, or other product is plainly marked with the proper name of the article contained therein, the name, address, and license number of the manufacturer, and the date beyond which the contents cannot be expected beyond reasonable doubt to yield their specific results. The suspension or revocation of any license shall not prevent the sale, barter, or exchange of any virus, serum, toxin, antitoxin, or other product aforesaid which has been sold and delivered by the licensee prior to such suspension or revocation, unless the owner or custodian of such virus, serum, toxin, antitoxin, or other product aforesaid has been notified by the Administrator not to sell, barter, or exchange the same.

(b) No person shall falsely label or mark any package or container of any virus, serum, toxin, antitoxin, or other product aforesaid; nor alter any label or mark on any package or container of any virus, serum, toxin, antitoxin, or other product aforesaid so as to falsify such label or mark.

(c) Any officer, agent, or employee of the Federal Security Agency, authorized by the Administrator for the purpose, may during all reasonable hours enter and inspect any establishment for the propagation or manufacture and preparation of any virus, serum, toxin, antitoxin, or other product aforesaid for sale, barter, or exchange in the District of Columbia, or to be sent, carried, or brought from any State or possession into any other State or possession or into any foreign country, or from any foreign country into any State or possession.

(d) Licenses for the maintenance of establishments for the propagation or manufacture and preparation of products described in subsection (a) of this section may be issued only upon a showing that the establishment and the products for which a license is desired meet standards, designed to insure the continued safety, purity, potency, and efficaciousness of such products, prescribed in regulations made jointly by the Surgeon General, the Surgeon General of the Army, and the Surgeon General of the Navy, and approved by the Administrator, and licenses for new products may be issued only upon a showing that they meet such standards. All such licenses shall be issued, suspended, and revoked as prescribed by regulations and all licenses issued for the maintenance of establishments for the propagation or manufacture and preparation, in any foreign country, of any such products for sale, barter, or exchange in any State or possession shall be issued upon condition that the licensees will permit the inspection of their establishments in accordance with subsection (c) of this section.

(e) No person shall interfere with any officer, agent, or employee of the Service in the



performance of any duty imposed upon him by this section or by regulations made by authority thereof.

(f) Any person who shall violate, or aid or abet in violating, any of the provisions of this section shall be punished upon conviction by a fine not exceeding \$500 or by imprisonment not exceeding 1 year, or by both such fine and imprisonment, in the discretion of the court.

(g) The persons and the products to which this section is applicable shall be subject also to the provisions of the Federal Food, Drug, and Cosmetic Act, except that section 505 of such act shall not apply in the case of any virus, serum, toxin, antitoxin, or other product propagated, manufactured, or prepared pursuant to an unsuspended and unrevoked license issued under this section.

#### *Preparation of biological products*

SEC. 352. (a) The Service may prepare for its own use any product described in section 351 and any product necessary to carrying out any of the purposes of section 301.

(b) The Service may prepare any product described in section 351 for the use of other Federal departments or agencies, and public or private agencies and individuals engaged in work in the field of medicine when such product is not available from establishments licensed under such section.

#### **PART C—QUARANTINE AND INSPECTION**

##### *Control of communicable diseases*

SEC. 361. (a) The Surgeon General, with the approval of the Administrator, is authorized to make and enforce such regulations as in his judgment are necessary to prevent the introduction, transmission, or spread of communicable diseases from foreign countries into the States or possessions, or from one State or possession into any other State or possession. For purposes of carrying out and enforcing such regulations, the Surgeon General may provide for such inspection, fumigation, disinfection, sanitation, pest extermination, destruction of animals or articles found to be so infected or contaminated as to be sources of dangerous infection to human beings, and other measures, as in his judgment may be necessary.

(b) Regulations prescribed under this section shall not provide for the apprehension, detention, or conditional release of individuals except for the purpose of preventing the introduction, transmission, or spread of such communicable diseases as may be specified from time to time in Executive orders of the President upon the recommendation of the National Advisory Health Council and the Surgeon General.

(c) Except as provided in subsection (d), regulations prescribed under this section, insofar as they provide for the apprehension, detention, examination, or conditional release of individuals, shall be applicable only to individuals coming into a State or possession from a foreign country, the Territory of Hawaii, or a possession.

(d) On recommendation of the National Advisory Health Council, regulations prescribed under this section may provide for the apprehension and examination of any individual reasonably believed to be infected with a communicable disease in a communicable stage and (1) to be moving or about to move from a State to another State; or (2) to be a probable source of infection to individuals who, while infected with such disease in a communicable stage, will be moving from a State to another State. Such regulations may provide that if upon examination any such individual is found to be infected, he may be detained for such time and in such manner as may be reasonably necessary.

#### *Suspension of entries and imports from designated places*

SEC. 362. Whenever the Surgeon General determines that by reason of the existence of any communicable disease in a foreign country there is serious danger of the introduction

of such disease into the United States, and that this danger is so increased by the introduction of persons or property from such country that a suspension of the right to introduce such persons and property is required in the interest of the public health, the Surgeon General, in accordance with regulations approved by the President, shall have the power to prohibit, in whole or in part, the introduction of persons and property from such countries or places as he shall designate in order to avert such danger, and for such period of time as he may deem necessary for such purpose.

#### *Special powers in time of war*

SEC. 363. To protect the military and naval forces and war workers of the United States, in time of war, against any communicable disease specified in Executive orders as provided in subsection (b) of section 361, the Surgeon General, on recommendation of the National Advisory Health Council, is authorized to provide by regulations for the apprehension and examination, in time of war, of any individual reasonably believed (1) to be infected with such disease in a communicable stage and (2) to be a probable source of infection to members of the armed forces of the United States or to individuals engaged in the production or transportation of arms, munitions, ships, food, clothing, or other supplies for the armed forces. Such regulations may provide that if upon examination any such individual is found to be so infected, he may be detained for such time and in such manner as may be reasonably necessary.

#### *Quarantine stations*

SEC. 364. (a) Except as provided in title II of the act of June 15, 1917, as amended (U. S. C., 1940 edition, title 50, secs. 191-194), the Surgeon General shall control, direct, and manage all United States quarantine stations, grounds, and anchorages, designate their boundaries, and designate the quarantine officers to be in charge thereof. With the approval of the President he shall from time to time select suitable sites for and establish such additional stations, grounds, and anchorages in the States and possessions of the United States as in his judgment are necessary to prevent the introduction of communicable diseases into the States and possessions of the United States.

(b) The Surgeon General shall establish the hours during which quarantine service shall be performed at each quarantine station, and, upon application by any interested party, may establish quarantine inspection during the 24 hours of the day, or any fraction thereof, at such quarantine stations as, in his opinion, require such extended service. He may restrict the performance of quarantine inspection to hours of daylight for such arriving vessels as cannot, in his opinion, be satisfactorily inspected during hours of darkness. No vessel shall be required to undergo quarantine inspection during the hours of darkness, unless the quarantine officer at such quarantine station shall deem an immediate inspection necessary to protect the public health. Uniformity shall not be required in the hours during which quarantine inspection may be obtained at the various ports of the United States.

#### *Certain duties of consular and other officers*

SEC. 365. (a) Any consular or medical officer of the United States, designated for such purpose by the Administrator, shall make reports to the Surgeon General, on such forms and at such intervals as the Surgeon General may prescribe, of the health conditions at the port or place at which such officer is stationed.

(b) It shall be the duty of the customs officers and of Coast Guard officers to aid in the enforcement of quarantine rules and regulations; but no additional compensation, except actual and necessary traveling ex-

penses, shall be allowed any such officer by reason of such services.

#### *Bills of health*

SEC. 366. (a) Any vessel at any foreign port or place clearing or departing for any port or place in a State or possession shall be required to obtain from the consular officer of the United States or from the Public Health Service officer, or other medical officer of the United States designated by the Surgeon General, at the port or place of departure, a bill of health in duplicate, in the form prescribed by the Surgeon General. The President, from time to time, shall specify the ports at which a medical officer shall be stationed for this purpose. Such bill of health shall set forth the sanitary history and condition of said vessel, and shall state that it has in all respects complied with the regulations prescribed pursuant to subsection (c). Before granting such duplicate bill of health, such consular or medical officer shall be satisfied that the matters and things therein stated are true. The consular officer shall be entitled to demand and receive the fees for bills of health and such fees shall be established by regulation.

(b) Original bills of health shall be delivered to the collectors of customs at the port of entry. Duplicate copies of such bills of health shall be delivered at the time of inspection to quarantine officers at such port. The bills of health herein prescribed shall be considered as part of the ship's papers, and when duly certified to by the proper consular or other officer of the United States, over his official signature and seal, shall be accepted as evidence of the statements therein contained in any court of the United States.

(c) The Surgeon General shall from time to time prescribe regulations, applicable to vessels referred to in subsection (a) of this section for the purpose of preventing the introduction into the States or possessions of the United States of any communicable disease by securing the best sanitary condition of such vessels, their cargoes, passengers, and crews. Such regulations shall be observed by such vessels prior to departure, during the course of the voyage, and also during inspection, disinfection, or other quarantine procedure upon arrival at any United States quarantine station.

(d) The provisions of subsections (a) and (b) of this section shall not apply to vessels plying between such foreign ports on or near the frontiers of the United States and ports of the United States as are designated by treaty or may be designated by regulation; nor, to the extent prescribed by regulations, to such of the other vessels referred to in subsection (a) hereof as may be designated in such regulations.

(e) It shall be unlawful for any vessel to enter any part in any State or possession of the United States to discharge its cargo, or land its passengers, except upon a certificate of the quarantine officer that regulations prescribed under subsection (c) have in all respects been complied with by such officer, the vessel, and its master. The master of every such vessel shall deliver such certificate to the collector of customs at the port of entry, together with the original bill of health and other papers of the vessel.

#### *Civil air navigation and civil aircraft*

SEC. 367. The Surgeon General is authorized to provide by regulations for the application to civil air navigation and civil aircraft of any of the provisions of sections 364, 365, and 366 and regulations prescribed thereunder (including penalties and forfeitures for violations of such sections and regulations), to such extent and upon such conditions as he deems necessary for the safeguarding of the public health.



### Penalties

SEC. 368. (a) Any person who violates any regulation prescribed under section 361, 362, or 363, or any provision of section 366 or any regulation prescribed thereunder, or who enters or departs from the limits of any quarantine station, ground, or anchorage in disregard of quarantine rules and regulations or without permission of the quarantine officer in charge, shall be punished by a fine of not more than \$1,000 or by imprisonment for not more than 1 year, or both.

(b) Any vessel which violates section 364 or section 366, or any regulations thereunder, or under section 367, or which enters within or departs from the limits of any quarantine station, ground, or anchorage in disregard of the quarantine rules and regulations or without permission of the officer in charge, shall forfeit to the United States not more than \$5,000, the amount to be determined by the court, which shall be a lien on such vessel, to be recovered by proceedings in the proper district court of the United States. In all such proceedings the United States district attorney shall appear on behalf of the United States; and all such proceedings shall be conducted in accordance with the rules and laws governing cases of seizure of vessels for violation of the revenue laws of the United States.

(c) With the approval of the Administrator, the Surgeon General may, upon application therefor, remit or mitigate any forfeiture provided for under subsection (b) of this section, and he shall have authority to ascertain the facts upon all such applications.

### Administration of oaths

SEC. 369. Medical officers of the United States, when performing duties as quarantine officers at any port or place within the United States, are authorized to take declarations and administer oaths in matters pertaining to the administration of the quarantine laws and regulations of the United States.

### TITLE IV—NATIONAL CANCER INSTITUTE

#### TO BE A DIVISION IN NATIONAL INSTITUTE OF HEALTH

SEC. 401. The National Cancer Institute shall be a division in the National Institute of Health.

#### CANCER RESEARCH, ETC.

SEC. 402. In carrying out the purposes of section 301 with respect to cancer, the Surgeon General, through the National Cancer Institute and in cooperation with the National Cancer Advisory Council, shall—

(a) conduct, assist, and foster researches, investigations, experiments, and studies relating to the cause, prevention, and methods of diagnosis and treatment of cancer;

(b) promote the coordination of researches conducted by the Institute and similar researches conducted by other agencies, organizations, and individuals;

(c) provide training and instruction in technical matters relating to the diagnosis and treatment of cancer;

(d) provide fellowships in the institute from funds appropriated or donated for such purpose;

(e) secure for the institute consultation services and advice of cancer experts from the United States and abroad;

(f) cooperate with State health agencies in the prevention, control, and eradication of cancer;

(g) procure, use, and lend radium as provided in section 403.

#### ADMINISTRATION

SEC. 403. (a) In carrying out the provisions of section 402 all appropriate provisions of section 301 shall be applicable to the authority of the Surgeon General, and he is authorized—

(1) to purchase radium, from time to time, without regard to section 3709 of the Revised Statutes, to make such radium available for

the purposes of this title, both to the Service and by loan to other agencies and institutions for such consideration and subject to such conditions as he may prescribe;

(2) to provide the necessary facilities where training and instruction may be given in all technical matters relating to diagnosis and treatment of cancer to persons found by the Surgeon General to have proper technical qualifications, and designated by him for such training or instruction, and to fix and pay them a per diem allowance during such training or instruction of not to exceed \$10.

(b) The Surgeon General shall recommend acceptance of conditional gifts pursuant to section 501 of this act, for study, investigation, or research into the cause, prevention; and methods of diagnosis and treatment of cancer, or for the acquisition of grounds or for the erection, equipment, or maintenance of premises, buildings, or equipment of the institute, only after consultation with the National Cancer Advisory Council. Donations of \$50,000 or over in aid of research under this title may be acknowledged by the establishment within the institute of suitable memorials to the donors.

(c) In carrying out the purposes of section 402 grants-in-aid for cancer projects shall be made only after review and recommendation of the National Cancer Advisory Council made pursuant to section 404.

#### FUNCTIONS OF COUNCIL

SEC. 404. The council is authorized—

(a) to review research projects or programs submitted to or initiated by it relating to the study of the cause, prevention, or methods of diagnosis and treatment of cancer, and certify approval to the Surgeon General, for prosecution under section 402, of any such projects which it believes show promise of making valuable contributions to human knowledge with respect to the cause, prevention, or methods of diagnosis and treatment of cancer;

(b) to collect information as to studies which are being carried on in the United States or any other country as to the cause, prevention and methods of diagnosis and treatment of cancer, by correspondence or by personal investigation of such studies, and with the approval of the Surgeon General make available such information through the appropriate publications for the benefit of health agencies and organizations (public or private), physicians, or any other scientists, and for the information of the general public;

(c) to review applications from any university, hospital, laboratory, or other institution whether public or private, or from individuals, for grants-in-aid for research projects relating to cancer, and certify to the Surgeon General its approval of grants-in-aid in the cases of such projects which show promise of making valuable contributions to human knowledge with respect to the cause, prevention, or methods of diagnosis or treatment of cancer;

(d) to recommend to the Surgeon General for acceptance conditional gifts pursuant to section 501 of this act; and

(e) to make recommendations to the Surgeon General with respect to carrying out the provisions of this title.

#### APPROPRIATIONS

SEC. 405. Appropriations to carry out the purposes of this title shall be available for the acquisition of land or the erection of buildings only if so specified, but in the absence of express limitation therein may be expended in the District of Columbia for personal services, stenographic recording and translating services, by contract if deemed necessary, without regard to section 3709 of the Revised Statutes; traveling expenses (including the expenses of attendance at meetings when specifically authorized by the Surgeon General); rental, supplies and equip-

ment, purchase and exchange of medical books, books of reference, directories, periodicals, newspapers, and press clippings; purchase, operation, and maintenance of motor-propelled passenger-carrying vehicles; printing and binding (in addition to that otherwise provided by law); and for all other necessary expenses in carrying out the provisions of this title.

#### OTHER WORK WITH RESPECT TO CANCER

SEC. 406. This title shall not be construed as limiting (1) the functions or authority of the Surgeon General or the Public Health Service under any other title of this act, or of any other officer or agency of the United States, relating to the study of the prevention, diagnosis, and treatment of cancer; or (2) the expenditure of money therefor.

#### TITLE V—MISCELLANEOUS

##### GIFTS

SEC. 501. (a) The Administrator is authorized to accept on behalf of the United States gifts made unconditionally by will or otherwise for the benefit of the Service or for the carrying out of any of its functions. Conditional gifts may be so accepted if recommended by the Surgeon General, and the principal of and income from any such conditional gift shall be held, invested, reinvested, and used in accordance with its conditions, but no gift shall be accepted which is conditioned upon any expenditure not to be met therefrom or from the income thereof unless such expenditure has been approved by act of Congress.

(b) Any unconditional gift of money accepted pursuant to the authority granted in subsection (a) of this section, the net proceeds from the liquidation (pursuant to subsection (c) or subsection (d) of this section) of any other property so accepted, and the proceeds of insurance on any such gift property not used for its restoration, shall be deposited in the Treasury of the United States and are hereby appropriated and shall be held in trust by the Secretary of the Treasury for the benefit of the Service, and he may invest and reinvest such funds in interest-bearing obligations of the United States or in obligations guaranteed as to both principal and interest by the United States. Such gifts and the income from such investments shall be available for expenditure in the operation of the Service and the performance of its functions, subject to the same examination and audit as is provided for appropriations made for the Service by Congress.

(c) The evidences of any unconditional gift of intangible personal property, other than money, accepted pursuant to the authority granted in subsection (a) of this section shall be deposited with the Secretary of the Treasury and he, in his discretion, may hold them, or liquidate them except that they shall be liquidated upon the request of the Administrator, whenever necessary to meet payments required in the operation of the Service or the performance of its functions. The proceeds and income from any such property held by the Secretary of the Treasury shall be available for expenditure as is provided in subsection (b) of this section.

(d) The administrator shall hold any real property or any tangible personal property accepted unconditionally pursuant to the authority granted in subsection (a) of this section and he shall permit such property to be used for the operation of the service and the performance of its functions or he may lease or hire such property, and may insure such property, and deposit the income thereof with the Secretary of the Treasury to be available for expenditure as provided in subsection (b) of this section: *Provided*, That the income from any such real property or tangible personal property shall be available for expenditure in the discretion of the administrator for the maintenance, preserva-



tion, or repair and insurance of such property and that any proceeds from insurance may be used to restore the property insured. Any such property when not required for the operation of the service or the performance of its functions may be liquidated by the administrator, and the proceeds thereof deposited with the Secretary of the Treasury, whenever in his judgment the purposes of the gifts will be served thereby.

#### USE OF IMMIGRATION STATION HOSPITAL

SEC. 502. The Immigration and Naturalization Service may, by agreement of the heads of the departments concerned, permit the Public Health Service to use hospitals at immigration stations for the care of Public Health Service patients. The Surgeon General shall reimburse the Immigration and Naturalization Service for the actual cost of furnishing fuel, light, water, telephone, and similar supplies and services, which reimbursement shall be covered into the proper Immigration and Naturalization Service appropriation, or such costs may be paid from working funds established as provided by law, but no charge shall be made for the expense of physical upkeep of the hospitals. The Immigration and Naturalization Service shall reimburse the Surgeon General for the care and treatment of persons detained in hospitals of the Public Health Service at the request of the Immigration and Naturalization Service unless such persons are entitled to care and treatment under section 322 (a).

#### MONEY COLLECTED FOR CARE OF PATIENTS

SEC. 503. Money collected as provided by law for expenses incurred in the care and treatment of foreign seamen, and money received for the care and treatment of pay patients, including any amounts received from any executive department on account of care and treatment of pay patients, shall be covered into the appropriation from which the expenses of such care and treatment were paid.

#### CARE OF PUBLIC HEALTH SERVICE PATIENTS AT ST. ELIZABETHS HOSPITAL

SEC. 504. Insane patients entitled to treatment by the service shall be admitted, upon order of the administrator, into St. Elizabeths Hospital or, upon order of the Surgeon General, into any hospital, institution, or station of the service especially equipped for the accommodation of such patients and shall be cared for and treated therein until cured or until ordered removed by the officer authorizing such admittance.

#### SETTLEMENT OF CLAIMS

SEC. 505. The Administrator may consider, ascertain, adjust, and determine any claim which shall accrue, on account of damages occasioned by collisions or incident to the operation of vessels of the Service, and for which damages such vessels are found by him to be responsible. To be considered for settlement under this section claims must be presented to the Administrator within 1 year of their accrual. The amount ascertained and determined to be due any claimant, not exceeding \$3,000 in any one case, shall be certified to Congress as a legal claim for payment out of appropriations that may be made therefor by Congress, together with a brief statement of the character of each claim, the amount claimed, and the amount allowed. Acceptance by any claimant of the amount determined to be due under this section shall be deemed to be in full and final settlement of such claim against the Government of the United States.

#### TRANSPORTATION OF REMAINS OF OFFICERS

SEC. 506. Appropriations available for traveling expenses of the Service shall be available for meeting the cost of preparation for burial and of transportation to the place of burial of remains of commissioned officers, and of personnel specified in regulations, who die in line of duty.

#### SETTLEMENT OF ACCOUNTS OF DECEASED OFFICERS

SEC. 507. (a) In the settlement of the accounts of deceased commissioned officers where the amount due the decedent's estate is less than \$1,000 and no demand is presented by a duly appointed representative of the estate, the accounting officers may allow the amount found due to the decedent's widow or legal heirs in the following order of precedence: First, to the widow; second, if the decedent left no widow, or the widow be dead at time of settlement, then to the children or their issue, per stirpes; third, if no widow or children or their issue, then to the father and mother in equal parts, provided the father has not abandoned the support of his family, in which case to the mother alone; fourth, if either the father or mother be dead, then to the one surviving; fifth, if there be no widow, child, father, or mother at the date of settlement, then to the brothers and sisters and children of deceased brothers and sisters, per stirpes.

(b) Subsection (a) shall not be construed so as to prevent payment of funeral expenses from the amount due the decedent's estate if a claim therefor is presented, before settlement by the accounting officers, by the person or persons who actually paid such expenses.

#### TRANSFER OF FUNDS

SEC. 508. For the purpose of any reorganization under section 202, the Administrator, with the approval of the Director of the Bureau of the Budget, is authorized to make such transfers of funds between appropriations as may be necessary for the continuance of transferred functions.

#### AVAILABILITY OF APPROPRIATIONS

SEC. 509. Appropriations for carrying out the provisions of section 301 shall be available for expenditure for personal services and rent at the seat of Government, for books of reference, periodicals, and exhibits, and for printing and binding.

#### UNAUTHORIZED WEARING OF UNIFORMS

SEC. 510. Except as may be authorized by regulations of the President, the insignia and uniform of commissioned officers of the Service, or any distinctive part of such insignia or uniform, or any insignia or uniform any part of which is similar to a distinctive part thereof, shall not be worn, after the promulgation of such regulations, by any person other than a commissioned officer of the Service, and any person violating this section shall be subject to the penalties provided by the act of June 3, 1916, as amended (U. S. C., 1940 ed., title 10, sec. 1393), in the case of unlawful wearing of the uniform of commissioned officers of the Army.

#### ANNUAL REPORT

SEC. 511. The Surgeon General shall transmit to the Administrator, for submission to the Congress at the beginning of each regular session, a full report of the administration of the functions of the Service under this act, including a detailed statement of receipts and disbursements.

#### TITLE VI—TEMPORARY AND EMERGENCY PROVISIONS AND AMENDMENTS AND REPEALS

##### EXISTING POSITIONS, PROCEDURES, AND SO FORTH

SEC. 601. (a) The provisions of this act shall not affect the term or tenure of office or employment of the Surgeon General, or of any officer or employee of the Service, or of any member of the National Advisory Health Council or the National Advisory Cancer Council, in office or employed at the time of its enactment.

(b) Notwithstanding the provisions of this act, existing positions, divisions, committees, and procedures in the Service shall continue unless and until abolished, changed, or transferred pursuant to authority granted in this act.

##### EXISTING REGULATIONS, AND SO FORTH

SEC. 602. Notwithstanding the provisions of this act, existing rules, regulations of or ap-

plicable to the Service, and Executive orders, shall remain in effect until repealed, or until modified or superseded by regulations made in accordance with the provisions of this act.

#### FUNDS, APPROPRIATIONS, AND PROPERTY

SEC. 603. All appropriations, allocations, and other funds, and all properties available for use by the Public Health Service or any division or unit thereof shall continue to be available to the Service.

#### APPROPRIATIONS FOR EMERGENCY HEALTH AND SANITATION ACTIVITIES

SEC. 604. For each fiscal year during the continuance of the present war and during any period of demobilization after the war, there is hereby authorized to be appropriated such sum as may be necessary to enable the Surgeon General, either directly or through State health authorities, to conduct health and sanitation activities in areas adjoining military or naval reservations within or without the United States, in areas where there are concentrations of military or naval forces, in Government and private industrial plants engaged in defense work, and in areas adjoining such industrial plants.

#### EMPLOYEES' COMPENSATION

SEC. 605. (a) Section 7 of the act of September 7, 1916, entitled "An act to provide compensation for employees of the United States suffering injuries while in the performance of their duties, and for other purposes," as amended (U. S. C., 1940 ed., title 5, sec. 757), is amended by changing the period at the end thereof to a colon and adding the following: "Provided, That whenever any person is entitled to receive any benefits under this act by reason of his injury, or by reason of the death of an employee, as defined in section 40, and is also entitled to receive from the United States any payments or benefits (other than the proceeds of any insurance policy), by reason of such injury or death under any other act of Congress, because of service by him (or in the case of death, by the deceased) as an employee, as so defined, such person shall elect which benefits he shall receive. Such election shall be made within 1 year after the injury or death, or such further time as the Commission may for good cause allow, and when made shall be irrevocable unless otherwise provided by law."

(b) The definition of the term "employee" in section 40 of such act of September 7, 1916, as amended (U. S. C., 1940 ed., title 5, sec. 790), is amended to read as follows:

"The term 'employee' includes all civil employees of the United States and of the Panama Railroad Co., commissioned officers of the Regular Corps of the Public Health Service, officers in the Reserve of the Public Health Service on active duty, and all persons, other than independent contractors and their employees, employed on the Menominee Indian Reservation in the State of Wisconsin, subsequent to September 7, 1916, in operations conducted pursuant to the act entitled 'An act to authorize the cutting of timber, the manufacture and sale of lumber, and the preservation of the forests on the Menominee Indian Reservation in the State of Wisconsin,' approved March 28, 1908, as amended, or any other act relating to tribal timber and logging operations on the Menominee Reservation."

(c) In the case of injury or death of a commissioned officer of the Service occurring after November 10, 1943, and on or before the date of the termination of the present war, the election required by section 7 of such act of September 7, 1916, as amended (U. S. C., 1940 ed., title 5, sec. 757), may be made, and the notice required by section 15 thereof and the written claim required by section 18 thereof may be filed, within such time as may be provided by regulations of the United States Employees' Compensation Commission, but not later than the expiration of 1 year following the termina-



tion of the present war. Prior to the expiration of such year any such election may be revised, and such revision shall operate retroactively to the date of death or injury, but there shall be deducted from the compensation or other benefit payable pursuant to a revised election any sum (except the proceeds of any insurance policy) theretofore paid on account of such death or injury.

(d) In the case of death of a commissioned officer of the Service which occurred after December 7, 1941, and prior to November 11, 1943, the rights provided to surviving beneficiaries by section 10 of the Public Health Service Act of 1943 shall continue notwithstanding the repeal of that act. Such beneficiaries, in addition to the right to receive 6 months' pay, shall have the same right of election and of revising elections as is provided by subsection (c) of this section, except that in case of a revised election no deduction shall be made on account of such 6 months' pay.

#### COMPUTATION OF RETIRED PAY IN CERTAIN CASES

SEC. 606. In the case of commissioned officers of the Service appointed prior to the enactment of this act, there shall be included, in determining retired pay pursuant to section 211 (c) (1), noncommissioned service in the Public Health Service, as well as all commissioned service.

#### ALLOWANCES FOR UNIFORMS TO CERTAIN COMMISSIONED PERSONNEL

SEC. 607. Each commissioned officer of the Service who was appointed to the Regular Corps or called to active duty in the Reserve Corps since December 7, 1941, and prior to the enactment of this act, and who on or after November 11, 1943, was on active duty in the grade of junior assistant, assistant, or passed assistant, and was receiving the pay of the first, second, or third pay period, shall be entitled to receive an allowance of \$250 for uniforms and equipment.

#### PATIENTS OF ST. ELIZABETH'S HOSPITAL IN PUBLIC HEALTH SERVICE HOSPITALS

SEC. 608. Insane patients entitled to treatment in St. Elizabeths Hospital who may heretofore or hereafter, during the continuance of the present war, or during the period of 6 months thereafter, have been admitted to hospitals of the Service, may continue to be cared for and treated in such hospitals notwithstanding the termination of such period.

#### ELIGIBILITY OF OSTEOPATHS TO APPOINTMENT IN THE RESERVE CORPS

SEC. 609. For the duration of the present war and for 6 months thereafter graduates of reputable osteopathic colleges shall be eligible for appointment as reserve officers in the Service.

#### TEMPORARY PROVISIONS RESPECTING MEDICAL AND HOSPITAL BENEFITS

SEC. 610. (a) Subject to regulations of the President, members of the Women's Reserve of the Coast Guard, or their dependents, shall be entitled to the benefits provided by section 326 for male officers and enlisted men of the Coast Guard or their dependents: *Provided*, That the husbands of such members shall not be considered dependents, and the children of such members shall not be considered dependents unless their father is dead or they are in fact dependent on their mother for their chief support.

(b) Subject to regulations of the President, lightkeepers and assistant lightkeepers (who during their active service were entitled to medical relief at hospitals and other stations of the Public Health Service), and officers and crews of vessels of the former Light-house Service, who have been or who may hereafter be retired under the provisions of section 6 of the act of June 20, 1918, as amended (U. S. C., 1940 ed., title 33, sec. 763), shall be entitled to medical, surgical, and

dental treatment and hospitalization by the Public Health Service.

#### REPEAL OF EXISTING LAW

SEC. 611. The following statutes or parts of statutes are hereby repealed:

Section 3639 in title XLI, and sections 4801, 4802, 4803, 4804, 4805, and 4806 in title LIX of the Revised Statutes of the United States;

The last paragraph under the heading "Miscellaneous" in chapter 130, 18 Statutes at Large 371, which paragraph is the seventh beginning on page 377;

Chapter 156, 18 Statutes at Large 485;

Chapter 66, 20 Statutes at Large 37;

Chapter 202, 20 Statutes at Large 484;

Chapter 61, 21 Statutes at Large 46;

Section 1, and the final clause of section 2 (which reads as follows: "and the said quarantine stations when so established shall be conducted by the Marine Hospital Service under regulations framed in accordance with the act of April 29, 1878"), of chapter 727, 25 Statutes at Large 355;

Chapter 19, 25 Statutes at Large 639;

Chapter 51, 26 Statutes at Large 31;

The last sentence of the paragraph headed "Office of the Supervising Surgeon General, Marine Hospital Service" in chapter 541, 26 Statutes at Large 908, which appears at page 923 and reads as follows: "And hereafter the Supervising Surgeon General is hereby authorized to cause the detail of two surgeons and two passed assistant surgeons for duty in the Bureau, who shall each receive the pay and allowances of their respective grades in the general service.;"

Chapter 114, 27 Statutes at Large 449;

The last sentence of the paragraph headed "Office of Supervising Surgeon General, Marine Hospital Service", in chapter 174, 28 Statutes at Large 162, which appears at page 179 and which reads as follows: "And hereafter the Supervising Surgeon General of the Marine Hospital Service is hereby authorized to cause the detail of an additional medical officer and one hospital steward for duty in the Bureau, who shall each receive the pay and allowances of his respective grade in the general service.;"

Chapter 213, 28 Statutes at Large 229;

Chapter 300, 28 Statutes at Large 372;

The last sentence of the paragraph headed "Office of Supervising Surgeon General, Marine Hospital Service", in chapter 177, 28 Statutes at Large 764, which appears at page 780 and which reads as follows: "And hereafter the Supervising Surgeon General of the Marine Hospital Service is hereby authorized to cause the detail of two hospital attendants from the port of New York for duty in the laboratory of the Bureau, and who shall each receive the pay equivalent to the compensation of a first-class hospital attendant.;"

The proviso at the end of the paragraph headed "Office of Supervising Surgeon General Marine Hospital Service" in chapter 265, 29 Statutes at Large 538, which appears at page 554 and which reads as follows: "*Provided*, That the Secretary of the Treasury is hereby authorized, in his discretion, to grant to the medical officers of the Marine Hospital Service commissioned by the President, without deduction of pay, leaves of absence for the same period of time and in the same manner as is now authorized to be granted to officers of the Army by the Secretary of War.;"

Chapter 349, 30 Statutes at Large 976;

Section 10, chapter 191, 31 Statutes at Large 77, at page 80;

The first paragraph of section 97 of chapter 339, 31 Statutes at Large 141;

Chapter 836, 31 Statutes at Large 1086;

That portion of the third paragraph of section 84 of chapter 1369, 32 Statutes at Large 691, which appears at page 711 and which reads as follows: "and the provisions of law relating to the public health and

quarantine shall apply in the case of all vessels entering a port of the United States or its aforesaid possessions from said islands, where the customs officers at the port of departure shall perform the duties required by such law of consular officers in foreign ports";

Chapter 1370, 32 Statutes at Large 712;

Chapter 1378, 32 Statutes at Large 728;

Chapter 1443, 33 Statutes at Large 1009;

The last sentence of the last paragraph under the heading "Public Health and Marine Hospital Service" in chapter 1484, 33 Statutes at Large 1214, which appears at page 1217 and which reads as follows: "And the Secretary of the Treasury shall, for the fiscal year 1907, and annually thereafter, submit to Congress, in the regular Book of Estimates, detailed estimates of the expenses of maintaining the Public Health and Marine Hospital Service.;"

Public Resolution No. 21, 33 Statutes at Large 1283;

Chapter 3433, 34 Statutes at Large 299;

Section 17 of chapter 1134, 34 Statutes at Large 898, at page 903;

That portion of the third paragraph under the heading "Back pay and bounty" in chapter 200, 35 Statutes at Large 373, as amended by chapter 213, 52 Statutes at Large 352, which is at page 352 of 52 Statutes at Large and which reads as follows: "and of deceased commissioned officers of the Public Health Service";

The proviso in the tenth paragraph under the heading "Public Health and Marine Hospital Service" in chapter 285, 36 Statutes at Large 1363, which appears in the eighth paragraph on page 1394 and which reads as follows:

"*Provided*, That there may be admitted into said hospitals, for study, persons with infectious or other diseases affecting the public health, and not to exceed 10 cases in any one hospital at one time", and the substantially similar provisions appearing under the heading "Public Health and Marine Hospital Service" or the heading "Public Health Service" in the following statutes: Chapter 355, 37 Statutes at Large 417, at page 435; chapter 3, 38 Statutes at Large 4, at page 24; chapter 209, 39 Statutes at Large 262, at page 278; chapter 28, 40 Statutes at Large 459, at page 468; chapter 113, 40 Statutes at Large 634, at page 644; chapter 24, 41 Statutes at Large 163, at page 175;

Chapter 288, 37 Statutes at Large 309;

The proviso at the end of the last paragraph under the heading "Public Health Service" in chapter 149, 37 Statutes at Large 912, which appears at page 915 and which reads as follows: "*Provided*, That hereafter the director of the Hygienic Laboratory shall receive the pay and allowances of a senior surgeon";

That portion of the second paragraph under the heading "Public Health Service" in chapter 3, 38 Statutes at Large 4, which appears at page 23 and which reads as follows: "at least six of the assistant surgeons provided for hereunder shall be required to have had a special training in the diagnosis of insanity and mental defect for duty in connection with the examination of arriving aliens with special reference to the detection of mental defection.;"

The proviso at the end of the twelfth paragraph under the heading "Public Health Service" in chapter 3, 38 Statutes at Large 4, which appears at page 24 and which reads as follows: "*Provided*, That hereafter commissioned officers and pharmacists, and those employees of the Service devoting all their time to field work, shall be entitled to hospital relief when taken sick or injured in line of duty";

The last clause of chapter 124, 38 Statutes at Large 387, which reads as follows: "and the said Secretary is hereby authorized to detail for duty on revenue cutters such surgeons



and other persons of the Public Health Service as he may deem necessary";

Section 5 of chapter 414, 39 Statutes at Large 536, at page 538;

Chapter 26, 39 Statutes at Large 872;

That portion of section 16 of chapter 29, 39 Statutes at Large 874, which appears at page 885 and which reads as follows: "who shall have had at least 2 years' experience in the practice of their profession since receiving the degree of doctor of medicine, and";

The sixth paragraph under the heading "Public Health Service" in chapter 3, 40 Statutes at Large 2, at page 6;

The seventh paragraph under the heading "Bureau of Mines" in chapter 27, 40 Statutes at Large 105, which is the third full paragraph appearing on page 146;

Chapter 37, 40 Statutes at Large 242;

The proviso in the fourth paragraph under the heading "Public Health Service" in chapter 113, 40 Statutes at Large 634, which appears at page 644 and which reads as follows: "Provided, That the pay of attendants at marine hospitals, quarantine, and immigration stations, whose present compensation is less than the rate of \$1,200 per annum, may be increased to a rate not to exceed \$1,200 per annum";

The proviso in the eleventh paragraph under the heading "Public Health Service" in chapter 113, 40 Statutes at Large 634, which appears on page 644 and which reads as follows: "Provided, That the Public Health Service, from and after July 1, 1918, shall pay to St. Elizabeths Hospital the actual per capita cost of maintenance in the said hospital of patients committed by that Service";

The sixtieth paragraph under the heading "Bureau of Fisheries" in chapter 113, 40 Statutes at Large 634, which is the fourth full paragraph appearing on page 694;

Sections 1, 3, 4, 6, and 7 of chapter XV of chapter 143, 40 Statutes at Large 845, at page 886;

The thirteenth paragraph under the heading "General Expenses, Bureau of Chemistry" in chapter 178, 40 Statutes at Large 973, which is the second full paragraph appearing on page 992;

Section 2 of chapter 179, 40 Statutes at Large 1008;

Chapter 196, 40 Statutes at Large 1017;

Chapter 98, 40 Statutes at Large 1302;

The last paragraph under the heading "Public Health Service" in chapter 6, 41 Statutes at Large 35, which is the sixth full paragraph appearing on page 45;

The proviso at the end of the first paragraph under the heading "Public Health Service" in chapter 94, 41 Statutes at Large 503, which appears at page 507, and which reads as follows: "Provided, That the Secretary of the Treasury is authorized to make regulations governing the disposal of articles produced by patients in the course of their curative treatment, either by allowing the patient to retain same or by selling the articles and depositing the money received to the credit of the appropriation from which the materials for making the articles were purchased";

The second paragraph under the heading "Public Health Service" in chapter 94, 41 Statutes at Large 503, which is the seventh full paragraph appearing on page 507;

The last paragraph under the heading "Public Health Service" in chapter 94, 41 Statutes at Large 503, which is the seventh full paragraph appearing on page 508, and the substantially similar provisions in chapter 161, 41 Statutes at Large 1367, at page 1378;

The fourth paragraph under the heading "Quarantine Stations" in chapter 235, 41 Statutes at Large 874, which is the eighth full paragraph appearing on page 875;

The third paragraph under the heading "Public Health Service" in chapter 235, 41

Statutes at Large 874, which is the ninth full paragraph appearing on page 883;

Chapter 80, 41 Statutes at Large 1149;

The second paragraph under the heading "Public Health Service" in chapter 23, 42 Statutes at Large 29, which is the thirteenth full paragraph appearing on page 38;

The proviso at the end of section 4 of chapter 57, 42 Statutes at Large 147, which appears at page 148, and which reads as follows: "Provided, That all commissioned personnel detailed or hereafter detailed from the United States Public Health Service to the Veterans' Bureau, shall hold the same rank and grade, shall receive the same pay and allowances, and shall be subject to the same rules for relative rank and promotion as now or hereafter may be provided by law for commissioned personnel of the same rank or grade or performing the same or similar duties in the United States Public Health Service";

The ninth paragraph under the heading "Bureau of Mines" in chapter 199, 42 Statutes at Large 552, which is the fourth full paragraph on page 588, and the substantially similar provisions in chapter 42, 42 Statutes at Large 1174, at page 1210; chapter 264, 43 Statutes at Large 390, at page 422; chapter 462, 48 Statutes at Large 1141, at page 1175;

The last sentence of the paragraph under the heading "Public Health Service" in chapter 258, 42 Statutes at Large 767, which appears at page 776, and which reads as follows: "The Immigration Service shall reimburse the Public Health Service on the basis of per capita rates fixed by the Secretary of the Treasury and the sums received by the Public Health Service from this source shall be covered into the Treasury as miscellaneous receipts";

The first proviso at the end of the ninth paragraph under the heading "Public Health Service" in chapter 84, 43 Statutes at Large 64, which appears at page 75 and which reads as follows: "Provided, That the Immigration Service shall permit the Public Health Service to use the hospitals at Ellis Island Immigration Station for the care of the Public Health Service patients, free of expense for physical upkeep, but with a charge of actual cost for fuel, light, water, telephone, and similar supplies and services, to be covered into the proper Immigration Service appropriations; and moneys collected by the Immigration Service on account of hospital expenses of persons detailed under the immigration laws and regulations at Ellis Island Immigration Station shall be covered into the Treasury as miscellaneous receipts";

and substantially similar provisions under the heading "Public Health Service" in chapter 87, 43 Statutes at Large 763, at page 775; chapter 43, 44 Statutes at Large 136, at page 147; chapter 126, 45 Statutes at Large 162 at page 174; chapter 39, 45 Statutes at Large 1028, at page 1039; chapter 289, 46 Statutes at Large 335, at page 347; chapter 110, 49 Statutes at Large 218, at page 229; chapter 725, 49 Statutes at Large 1827, at page 1839; chapter 180, 50 Statutes at Large 137, at page 149; chapter 55, 52 Statutes at Large 120, at page 133; chapter 428, 54 Statutes at Large 574, at page 585; chapter 269, 55 Statutes at Large 466, at page 481; and chapter 475, 56 Statutes at Large 562, at page 581;

Chapter 146, 43 Statutes at Large 809;

The words "and public health" in the last sentence of section 7 (b) of chapter 344, 44 Statutes at Large 568, at page 572;

The words "or public-health" wherever they appear in the second sentence of section 11 (b) of chapter 344, 44 Statutes at Large 568, at page 574, as amended;

Section 3 of chapter 371, 44 Statutes at Large 622, at page 626;

Chapter 625, 45 Statutes at Large 603;

The proviso at the end of the fifth paragraph under the heading "Public Health Service" in chapter 39, 45 Statutes at Large 1028, which appears at page 1039, and which

reads as follows: "Provided, That funds expendable for transportation and traveling expenses may also be used for preparation for shipment and transportation to their former homes of remains of officers who die in line of duty";

and substantially similar provisions appearing under the heading "Public Health Service" in chapter 289, 46 Statutes at Large 335, at page 346; chapter 110, 49 Statutes at Large 218, at page 228; chapter 180, 50 Statutes at Large 137, at page 148; chapter 55, 52 Statutes at Large 120, at page 132; chapter 428, 54 Statutes at Large 574, at page 584; chapter 269, 55 Statutes at Large 466, at page 480;

Chapter 82, 45 Statutes at Large 1085;

The second paragraph under the heading "Government in the Territories" in chapter 707, 45 Statutes at Large 1623, which is the seventh full paragraph on page 1644;

So much of chapter 70, 46 Statutes at Large 81, as reads: "and at his discretion to permit the erection of other buildings which may in the future be donated to promote the welfare of patients and personnel";

Chapter 125, 46 Statutes at Large 150;

Chapter 320, 46 Statutes at Large 379;

Section 4 of chapter 488, 46 Statutes at Large 585;

Chapter 597, 46 Statutes at Large 807;

Chapter 409, 46 Statutes at Large 1491;

The words "or public health" in the last sentence of section 2 of chapter 656, 48 Statutes at Large 1116;

The ninth paragraph under the heading "Public Health Service" in chapter 110, 49 Statutes at Large 218, which is the second full paragraph appearing on page 229;

Title VI of chapter 531, 49 Statutes at Large 620, at page 634;

Chapter 161, 49 Statutes at Large 1185;

That portion of chapter 550, 49 Statutes at Large 1514, which reads as follows: "or of the United States Public Health Service";

The proviso at the end of the thirteenth paragraph under the heading "Public Health Service" in chapter 725, 49 Statutes at Large 1827, which appears at page 1840 and which reads as follows: "Provided, That on and after July 1, 1936, the Narcotic Farm at Lexington, Ky., shall be known as United States Public Health Service Hospital, Lexington, Ky., but such change in designation shall not affect the status of any person in connection therewith or the status of such institution under any act applicable thereto";

The fourth paragraph under the heading "Public Health Service" in chapter 180, 50 Statutes at Large 137, which is the sixth full paragraph on page 148;

Section 2 of chapter 545, 50 Statutes at Large 547;

Chapter 565, 50 Statutes at Large 559;

The first proviso in the paragraph having the subhead "Division of Mental Hygiene" under the heading "Public Health Service" in chapter 55, 52 Statutes at Large 120, which appears at page 134 and which reads as follows: "Provided, That on and after July 1, 1938, the United States Narcotic Farm, Fort Worth, Tex., shall be known as United States Public Health Service Hospital of Fort Worth, Tex., but such change in designation shall not affect the status of any person in connection therewith or the status of such institution under any act applicable thereto";

Chapter 267, 52 Statutes at Large 439;

Chapter 92, 53 Statutes at Large 620;

Chapter 606, 53 Statutes at Large 1266;

Chapter 636, 53 Statutes at Large 138;

Section 509 of chapter 666, 53 Statutes at Large 1360, at page 1381;

Section 205 (b) of Reorganization Plan No. 1, 53 Statutes at Large 1423, at page 1425;

Chapter 566, 54 Statutes at Large 747;

The fourth paragraph under the heading "Public Health Service" in Public Law 11, Seventy-eighth Congress, at page 4; and Public Law 184, Seventy-eighth Congress.



## PRESERVATION OF RIGHTS AND LIABILITIES

SEC. 612. The repeal of the several statutes or parts of statutes accomplished by section 611 shall not affect any act done, or any right accruing or accrued, or any suit or proceeding had or commenced in any civil cause, before such repeal, but all rights and liabilities under the statutes or parts thereof so repealed shall continue, and may be enforced in the same manner, as if such repeal had not been made.

Mr. BULWINKLE. Mr. Speaker, I send two amendments to the Clerk's desk.

The Clerk read as follows:

Amendment offered by Mr. BULWINKLE: On page 2, line 19, strike out the word "primarily."

The amendment was agreed to.

The Clerk read as follows:

Amendment offered by Mr. BULWINKLE: Page 14, line 12, strike out the words "sanitary engineering" and insert "sanitary engineering and pharmacist."

The amendment was agreed to.

The bill was ordered to be engrossed and read a third time, was read the third time, and passed, and a motion to reconsider was laid on the table.

Mr. BULWINKLE. Mr. Speaker, I ask unanimous consent to revise and extend the remarks I made today on the bill just passed.

The SPEAKER. Without objection, it is so ordered.

There was no objection.

## AMENDMENT OF RAILWAY LABOR ACT

Mr. SABATH. Mr. Speaker, by direction of the Committee on Rules, I file a privileged report on Senate Joint Resolution 91, to aid in effectuating the purposes of the Railway Labor Act (Rept. No. 1500).

Mr. Speaker, this rule was to have been filed by the gentleman from Missouri [Mr. SLAUGHTER], but I do not see him on the floor; no doubt he is engaged on important business elsewhere. In his behalf I am filing this report.

The Clerk read House Resolution 559, as follows:

*Resolved*, That immediately upon the adoption of this resolution it shall be in order to move that the House resolve itself into the Committee of the Whole House on the state of the Union for the consideration of the joint resolution (S. J. Res. 91) to aid in effectuating the purposes of the Railway Labor Act. That after general debate, which shall be confined to the bill and shall continue not to exceed 2 hours, to be equally divided and controlled by the chairman and the ranking minority member of the Committee on Interstate and Foreign Commerce, the bill shall be read for amendment under the 5-minute rule. At the conclusion of the reading of the bill for amendment, the Committee shall rise and report the same to the House with such amendments as shall have been adopted, and the previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion, except one motion to recommit.

The SPEAKER. Referred to the House Calendar and ordered printed.

## RETIREMENT PAY FOR CERTAIN CIVILIAN OFFICIALS AND EMPLOYEES OF PANAMA CANAL

Mr. SABATH. Mr. Speaker, I call up House Resolution 549 for immediate consideration.

The Clerk read as follows:

*Resolved*, That immediately upon the adoption of this resolution it shall be in order to move that the House resolve itself into the Committee of the Whole House on the state of the Union for the consideration of the bill (H. R. 1117) to provide for the recognition of the services of the civilian officials and employees, citizens of the United States, engaged in and about the construction of the Panama Canal. That after general debate, which shall be confined to the bill and shall continue not to exceed 1 hour, to be equally divided and controlled by the chairman and the ranking minority member of the Committee on the Merchant Marine and Fisheries, the bill shall be read for amendment under the 5-minute rule. At the conclusion of the reading of the bill for amendment, the Committee shall rise and report the same to the House with such amendments as shall have been adopted and the previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit.

Mr. SABATH. Mr. Speaker, later on I shall yield 30 minutes to the gentleman from Ohio [Mr. BROWN].

Mr. Speaker, this bill makes in order the Peterson bill, H. R. 1117. This bill has been passed once or twice before by the Senate but unfortunately failed in the House. I do not know whether it failed to be reached during the session or whether it was defeated, but I know that if it was defeated it was because the Members did not have the information to which they were entitled; in other words, had they had all the information I am satisfied they would not have voted against passage but would have supported the measure.

## CALL OF THE HOUSE

Mr. KEEFE. Mr. Speaker, I make the point of order that a quorum is not present.

The SPEAKER. The Chair will count. [After counting.] Evidently no quorum is present.

The Doorkeeper will close the doors, the Sergeant at Arms will notify absent Members, and the Clerk will call the roll.

The Clerk called the roll, and the following Members failed to answer to their names:

[Roll No. 64]

|                 |               |              |
|-----------------|---------------|--------------|
| Allen, Ill.     | Capozzoli     | Furlong      |
| Arends          | Carter        | Gale         |
| Baldwin, Md.    | Celler        | Gallagher    |
| Baldwin, N. Y.  | Clason        | Gerlach      |
| Barden          | Cooley        | Gifford      |
| Barrett         | Costello      | Gilchrist    |
| Barry           | Dawson        | Goodwin      |
| Beall           | Dewey         | Gorski       |
| Bell            | Dickstein     | Gossett      |
| Bender          | Dies          | Grant, Ind.  |
| Blackney        | Disney        | Green        |
| Boykin          | Douglas       | Gross        |
| Bradley, Pa.    | Engle, Calif. | Hall         |
| Buckley         | Fay           | Edwin Arthur |
| Burchill, N. Y. | Fenton        | Hall         |
| Burdick         | Fernandez     | Leonard W.   |
| Burgin          | Fish          | Halleck      |
| Butler          | Folger        | Harris, Va.  |
| Canfield        | Fulbright     | Hart         |
| Cannon, Fla.    | Fulmer        | Hébert       |

|               |                 |                |
|---------------|-----------------|----------------|
| Heffernan     | Martin, Iowa    | Scott          |
| Hendricks     | Martin, Mass.   | Shafer         |
| Holmes, Mass. | Merritt         | Sheppard       |
| Johnson       | Morrow          | Sheridan       |
| Lyndon B.     | Morrison, N. C. | Simpson, Pa.   |
| Kelley        | Mundt           | Smith, Ohio    |
| Kennedy       | Murphy          | Smith, W. Va.  |
| Kerr          | Myers           | Snyder         |
| King          | Newsome         | Stearns, N. H. |
| Kleberg       | Norton          | Summers, Tex.  |
| Klein         | O'Neal          | Sundstrom      |
| Knutson       | O'Toole         | Taber          |
| LaFollette    | Patton          | Taylor         |
| Lane          | Peterson, Ga.   | Thomas, N. J.  |
| Lea           | Pfeifer         | Torrens        |
| Luce          | Philbin         | Treadway       |
| Ludlow        | Phillips        | Vincent, Ky.   |
| Lynch         | Pracht          | Vorys, Ohio    |
| McConnell     | C. Frederick    | Ward           |
| McCown        | Price           | Weichel, Ohio  |
| Magnuson      | Ramspeck        | Wene           |
| Manasco       | Rogers, Calif.  | Whitten        |
| Marcantonio   | Scanlon         | Wolfenden, Pa. |

The SPEAKER. On this roll call 302 Members have answered to their names—a quorum.

Further proceedings, under the call, were dispensed with.

## EXTENSION OF REMARKS

Mr. HOLIFIELD. Mr. Speaker, I ask unanimous consent to extend my remarks in the RECORD.

The SPEAKER. Is there objection to the request of the gentleman from California?

There was no objection.

[The matter referred to appears in the Appendix.]

Mr. LARCADE. Mr. Speaker, I ask unanimous consent to extend my remarks in the RECORD and include therein an article from the New Orleans Times-Picayune and an article from the Shreveport Times, relating to John H. Olsen, of Louisiana.

The SPEAKER. Is there objection to the request of the gentleman from Louisiana?

There was no objection.

[The matter referred to appears in the Appendix.]

Mr. ROWE. Mr. Speaker, I ask unanimous consent to revise and extend my remarks made today.

The SPEAKER. Is there objection to the request of the gentleman from Ohio?

There was no objection.

## HOUR OF MEETING TOMORROW

Mr. McCORMACK. Mr. Speaker, I ask unanimous consent that when the House adjourns today, it adjourn to meet at 11 o'clock tomorrow.

Mr. BROWN of Ohio. Mr. Speaker, reserving the right to object, will the gentleman please explain the schedule for tomorrow?

Mr. McCORMACK. We will first take up the land-grant bill. As I remember, there are two other bills coming up. We are anxious to get through with the program scheduled for tomorrow, and that is why we are meeting at 11 o'clock, having in mind the practical considerations with reference to the latter part of June.

Mr. BROWN of Ohio. I thank the gentleman.



The **SPEAKER**. Is there objection to the request of the gentleman from Massachusetts?

There was no objection.

**RETIREMENT PAY FOR CERTAIN CIVILIAN OFFICIALS AND EMPLOYEES OF PANAMA CANAL**

Mr. **SABATH**. Mr. Speaker, as I started to point out, this bill has passed the Senate twice and this session the Senate passed a similar bill, and I understand the gentlemen having the bill in charge will move to substitute the Senate bill for the House bill.

I did not make the point of order of no quorum, although I realize and fully appreciate how anxious the gentlemen on my left—Republican side—are always to hear me speak on any and every subject. Anyway, this being such a meritorious bill, and feeling that the Members are now familiar with it, I did not feel it would be necessary to have all of the Members present; however, I did welcome the point of order because the last time the bill was considered here the Members did not understand its merits and the benefits that would accrue to the few remaining and deserving old men who helped to construct the Panama Canal.

Mr. **BLAND**. Mr. Speaker, will the gentleman yield?

Mr. **SABATH**. I yield to the gentleman from Virginia.

Mr. **BLAND**. The bill was not defeated, but it was withdrawn at the time because of parliamentary conditions and other things. The bill itself has never been defeated.

Mr. **SABATH**. I am glad to hear that. I do not quite recollect what happened to it, but I know something did happen to it and there was some opposition to it and because of the opposition it must have been withdrawn.

The bill takes care or aims to take care of less than 1,000 men of average age close to 70, who, between May 4, 1904, and March 31, 1914, were induced to go to Panama to construct the Panama Canal.

To benefit one must be a United States citizen and have served 3 years in Panama. It is not necessary for me to inform the House of the unfortunate experience of the French under De Lessips in trying to construct the Panama Canal some years before and of the thousands upon thousand of men who were brought down there and lost their lives due to yellow fever and other pestilential diseases.

When our Government started to build the Canal many of our people feared the health conditions there and consequently special financial inducements were offered them and assurances given. Unfortunately, some of those who did not die during those days of epidemic and remained, did not receive merited consideration. This bill would provide for these old men. I will say none of them are in my district. It will provide for them a small pension to which I feel they are entitled, because the members of the naval and military forces, those in the Public Health Service, and the higher-ups elsewhere all have been taken care of.

Consequently, I feel that these men should be favorably considered. That is what this bill aims to do.

It is reliably calculated that all these beneficiaries will have passed on within 10 years and the aggregate cost of this proposal would be \$10,446,000. It is estimated that the average monthly annuity would be \$62.50.

Mr. **HOFFMAN**. Mr. Speaker, will the gentleman yield?

Mr. **SABATH**. I yield.

Mr. **HOFFMAN**. Under the principle of this bill would not every civilian who works outside of the continental United States in furtherance of our present war effort be likewise entitled to what you term a "pension"?

Mr. **SABATH**. No; I would not say that is an accurate statement.

Mr. **HOFFMAN**. Under the principle of the bill, would they not be also entitled?

Mr. **SABATH**. No.

Mr. **HOFFMAN**. Why not?

Mr. **SABATH**. I will read from the report of the committee. I very seldom do this; I very seldom have time to avail myself of that information, but for the benefit of the gentleman and the House I will read what the report states.

Mr. **HOFFMAN**. I have read that report.

Mr. **SABATH**. The report states the passage of H. R. 1117 therefore will not establish a precedent for any civil-service employee, whether in or out of service at the time of the passage of the Civil Service Retirement Act.

Mr. **HOFFMAN**. Well, they say so, but they do not tell us why it will not.

Mr. **SABATH**. I am satisfied that the chairman of the subcommittee [Mr. **PETERSON** of Florida] as well as the able Chairman of the Whole Committee on Merchant Marine and Fisheries [Mr. **BLAND**], having at all times the best interest of the Treasury at heart, will explain the merits of the bill and tell, convincingly, why it will not set a precedent.

Any Member who is familiar with the conditions on the Panama Canal when it was under construction, will, I am sure, not hesitate for a second before approving this proposal.

I had the good fortune as a member of the Committee on Interstate and Foreign Commerce to go to Panama with the committee, because our duty was to prepare a code for the Canal Zone; and during a week we were there I observed the conditions under which these men worked. I assure you gentleman that very few of you, or perhaps none of you, would have had the courage and stamina to remain there, to say nothing of doing the work that these men were obliged to do under most trying conditions.

Mr. **BOLTON**. Mr. Speaker, will the gentleman yield?

Mr. **SABATH**. I yield.

Mr. **BOLTON**. Will the gentleman tell me if they had any policies of insurance of any kind?

Mr. **SABATH**. Not that I know of. They did not get the additional pay that was promised them at that time. They were induced to go there on grounds of patriotism and duty, and when they got

to Panama very little was done for them and many of them died there. These older men are some of the lucky ones who remained there and who are still alive. The least we can do for them is to provide this little pension so that they will be to some extent compensated for the courage and patriotism they displayed when they remained in Panama under the terrible conditions that existed during construction of this great waterway, this great canal, which has been of such tremendous benefit to our Nation and the world.

Mr. **BOLTON**. But they had no compensation?

Mr. **SABATH**. Yes; some compensation which they received at the time.

Mr. **BOLTON**. They did receive some?

Mr. **SABATH**. Yes; they did not receive special or additional compensation.

Now, Mr. Speaker, I feel I have explained the bill as well as I am able to, and knowing that both the chairmen of the subcommittee and the full committee, as well as the ranking minority Member [Mr. **WELCH**], are here to further explain the bill and to give the Members more thorough information relative to it, I am concluding this presentation.

I will place in the **RECORD** at this point three relevant communications as follows:

THE PANAMA CANAL SOCIETY OF CHICAGO,  
Chicago, Ill., May 19, 1944.

Hon. SCHUYLER OTIS BLAND et al.

MY DEAR CONGRESSMEN: In order that you may know something about the feelings of the old timers who actually helped to construct the Panama Canal, the attached resolution, which was unanimously passed at our May 6 annual dinner, is sent you for information.

We appreciate your consideration of this bill, and are very hopeful that when it comes up for vote, as it may very shortly, you will give it the same fine consideration that you did in committee.

Yours very truly,

Secretary Treasurer.

**RESOLUTION**

Resolved by the Panama Canal Society of Chicago, Ill., That the Society hereby gives its unanimous approval of S. 683 and H. R. 1117, a bill in recognition of civilian construction employees of the Panama Canal, pending in the present Congress, and that the officers of the society be authorized and directed to do everything appropriate in behalf of the society to bring about early enactment of the proposed legislation.

CHICAGO, ILL., May 22, 1944.

Hon. ADOLPH J. SABATH,  
House Office Building,  
Washington, D. C.:

Reliably informed H. R. 1117 will be called Monday, 22. This measure is designed to right an old standing injustice and reward pioneer Canal builders, many of whom are in dire need. I respectfully request you to be present and do your utmost to obtain passage.

ERNEST E. LEE.

WASHINGTON, D. C., May 21, 1944.

Hon. ADOLPH J. SABATH,  
House of Representatives,  
Washington, D. C.:

H. R. 1117 is scheduled to come before the House Monday, May 22, for action. The Senate has passed an identical bill, S. 683. The







78TH CONGRESS  
2D SESSION

# H. R. 4624

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IN THE SENATE OF THE UNITED STATES

MAY 23 (legislative day, MAY 9), 1944

Read twice and referred to the Committee on Commerce

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## AN ACT

To consolidate and revise the laws relating to the Public Health Service, and for other purposes.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       TITLE I—SHORT TITLE AND DEFINITIONS

4                               SHORT TITLE

5       SECTION 1. Titles I to V, inclusive, of this Act may be  
6       cited as the "Public Health Service Act".

7                               DEFINITIONS

8       SEC. 2. When used in this Act—

9       (a) The term "Service" means the Public Health  
10      Service;



1       (b) The term "Surgeon General" means the Surgeon  
2 General of the Public Health Service;

3       (c) The term "Administrator" means the Federal Se-  
4 curity Administrator;

5       (d) The term "regulations", except when otherwise  
6 specified, means rules and regulations made by the Surgeon  
7 General with the approval of the Administrator;

8       (e) The term "executive department" means any execu-  
9 tive department, agency, or independent establishment of  
10 the United States or any corporation wholly owned by the  
11 United States;

12       (f) The term "State" means a State or the District of  
13 Columbia, Hawaii, Alaska, Puerto Rico, or the Virgin  
14 Islands, except that as used in section 361 (d) such term  
15 means a State, the District of Columbia, or Alaska;

16       (g) The term "possession" includes, among other pos-  
17 sessions, Puerto Rico and the Virgin Islands;

18       (h) The term "seamen" includes any person employed  
19 on board in the care, preservation, or navigation of any  
20 vessel, or in the service, on board, of those engaged in  
21 such care, preservation, or navigation;

22       (i) The term "vessel" includes every description of  
23 watercraft or other artificial contrivance used, or capable of  
24 being used, as a means of transportation on water, exclusive  
25 of aircraft and amphibious contrivances;

(j) The term "habit-forming narcotic drug" or "narcotic" means opium and coca leaves and the several alkaloids derived therefrom, the best known of these alkaloids being morphia, heroin, and codeine, obtained from opium, and cocaine derived from the coca plant; all compounds, salts, preparations, or other derivatives obtained either from the raw material or from the various alkaloids; Indian hemp and its various derivatives, compounds, and preparations, and peyote in its various forms; and

(k) The term "addict" means any person who habitually uses any habit-forming narcotic drug so as to endanger the public morals, health, safety, or welfare, or who is or has been so far addicted to the use of such habit-forming narcotic drugs as to have lost the power of self-control with reference to his addiction.

## TITLE II—ADMINISTRATION

### PUBLIC HEALTH SERVICE

SEC. 201. The Public Health Service in the Federal Security Agency shall be administered by the Surgeon General under the supervision and direction of the Administrator.

### ORGANIZATION

SEC. 202. The Service shall consist of (1) the Office of the Surgeon General, (2) the National Institute of Health, (3) the Bureau of Medical Services, and (4) the Bureau of State Services. The Surgeon General is authorized and di-

1 rected to assign to the Office of the Surgeon General, to  
2 the National Institute of Health, to the Bureau of Medical  
3 Services, and to the Bureau of State Services, respectively,  
4 the several functions of the Service, and to establish within  
5 them such divisions, sections, and other units as he may find  
6 necessary; and from time to time abolish, transfer, and con-  
7 solidate divisions, sections, and other units and assign their  
8 functions and personnel in such manner as he may find  
9 necessary for efficient operation of the Service. No division  
10 shall be established, abolished, or transferred, and no divisions  
11 shall be consolidated, except with the approval of the Admin-  
12 istrator. The National Institute of Health shall be adminis-  
13 tered as a part of the field service. The Surgeon General  
14 may delegate to any officer or employee of the Service such  
15 of his powers and duties under this Act, except the making  
16 of regulations, as he may deem necessary or expedient.

17 COMMISSIONED CORPS

18 SEC. 203. There shall be in the Service a commissioned  
19 Regular Corps and, for the purpose of securing a reserve  
20 for duty in the Service in time of national emergency, a  
21 Reserve Corps. All commissioned officers shall be citizens  
22 and shall be appointed without regard to the civil-service  
23 laws and compensated without regard to the Classification  
24 Act of 1923, as amended. Commissioned officers of the  
25 Reserve Corps shall be appointed by the President and



1 commissioned officers of the Regular Corps shall be ap-  
 2 pointed by him by and with the advice and consent of the  
 3 Senate. Commissioned officers of the Reserve Corps shall  
 4 at all times be subject to call to active duty by the Surgeon  
 5 General, including active duty for the purpose of training  
 6 and active duty for the purpose of determining their fitness  
 7 for appointment in the Regular Corps. All active service  
 8 in the Reserve Corps, as well as service in the Regular  
 9 Corps, shall be credited for the purpose of promotion in the  
 10 Regular Corps.

#### 11 SURGEON GENERAL

12 SEC. 204. The Surgeon General shall be appointed  
 13 from the Regular Corps for a four-year term by the Presi-  
 14 dent by and with the advice and consent of the Senate.  
 15 Upon the expiration of such term the Surgeon General,  
 16 unless reappointed, shall revert to the grade and number in  
 17 the Regular Corps that he would have occupied had he not  
 18 served as Surgeon General.

#### 19 DEPUTY SURGEON GENERAL AND ASSISTANT SURGEONS

#### 20 GENERAL

21 SEC. 205. (a) The Surgeon General shall assign one  
 22 commissioned officer from the Regular Corps to administer  
 23 the Office of the Surgeon General, to act as Surgeon General  
 24 during the absence or disability of the Surgeon General or  
 25 in the event of a vacancy in that office, and to perform such

1 other duties as the Surgeon General may prescribe, and while  
2 so assigned he shall have the title of Deputy Surgeon General.

3 (b) The Surgeon General shall assign six commissioned  
4 officers from the Regular Corps to be, respectively, the  
5 Director of the National Institute of Health, the Chief of the  
6 Bureau of State Services, the Chief of the Bureau of Medical  
7 Services, the Chief Medical Officer of the United States  
8 Coast Guard, the Chief Dental Officer of the Service, and  
9 the Chief Sanitary Engineering Officer of the Service, and  
10 while so serving they shall each have the title of Assistant  
11 Surgeon General.

12 (c) The Surgeon General shall designate the Assistant  
13 Surgeon General who shall serve as Surgeon General in case  
14 of absence or disability, or vacancy in the offices, of both the  
15 Surgeon General and the Deputy Surgeon General.

16 GRADES, RANKS, AND TITLES OF THE COMMISSIONED CORPS

17 SEC. 206. (a) The Surgeon General, during the period  
18 of his appointment as such, shall be of the same grade, with  
19 the same pay and allowances, as the Surgeon General of the  
20 Army; and the Deputy Surgeon General and Assistant Sur-  
21 geons General, while assigned as such, shall have the grade  
22 corresponding with the grade of Brigadier General, with  
23 the same pay and allowances. The grades of commissioned  
24 officers of the Service shall correspond with grades of officers  
25 of the Army as follows:

(1) Officers of the director grade—colonel;

(2) Officers of the senior grade—lieutenant colonel;

(3) Officers of the full grade—major;

(4) Officers of the senior assistant grade—captain;

(5) Officers of the assistant grade—first lieutenant;

and

(6) Officers of the junior assistant grade—second lieutenant.

(b) The titles of medical officers of the foregoing grades shall be respectively (1) medical director, (2) senior surgeon, (3) surgeon, (4) senior assistant surgeon, (5) assistant surgeon, and (6) junior assistant surgeon. The President is authorized to prescribe titles, appropriate to the several grades, for commissioned officers of the Service other than medical officers. All titles of the officers of the Reserve Corps shall have the suffix “Reserve”.

#### SPECIAL TEMPORARY POSITIONS

SEC. 207. (a) When necessary for the accomplishment of important temporary work in time of war, or of emergency proclaimed by him, the President may establish special temporary positions in the Service and prescribe grades which shall be applicable to officers during periods they are assigned to such positions. While assigned to any such position an officer shall receive the pay and allowances applicable to the grade so prescribed. Not more than three such posi-



1 tions existing at any one time shall have the grade of  
2 Assistant Surgeon General. The Surgeon General shall  
3 assign commissioned officers to such positions.

4 (b) Commissioned officers and qualified technical or  
5 professional noncommissioned personnel may be assigned by  
6 the Surgeon General to be chiefs of administrative units.  
7 Such assignments shall not affect the pay of commissioned  
8 officers so assigned, except that when any commissioned  
9 officer below the grade of director is assigned to serve as  
10 chief of a division such officer during the period so assigned  
11 shall have the temporary grade and receive the pay and  
12 allowances applicable to the director grade.

13 APPOINTMENT OF PERSONNEL

14 SEC. 208. (a) (1) Except as provided in subsection  
15 (b) of this section, original appointments to the Regular  
16 Corps may be made only in the junior assistant, assistant,  
17 and senior assistant grades and original appointments to a  
18 grade above junior assistant shall be made only after passage  
19 of an examination, given in accordance with regulations of  
20 the President, in one or more of the several branches of  
21 medicine, surgery, dentistry, hygiene, sanitary engineering,  
22 pharmacy, or related scientific specialties in the field of public  
23 health.

24 (2) Original appointments to the Reserve Corps may  
25 be made to any grade up to and including the director grade

1 but only after passage of an examination given in accordance  
2 with regulations of the President. Reserve commissions shall  
3 be for a period of not more than five years and any such com-  
4 mission may be terminated by the President at any time,  
5 in his discretion.

6 (b) Whenever commissioned officers of the Service are  
7 not available for the performance of permanent duties re-  
8 quiring highly specialized training and experience in special  
9 fields related to public health, the Administrator on recom-  
10 mendation of the Surgeon General shall report that fact to  
11 the President and the President is authorized to appoint, by  
12 and with the advice and consent of the Senate, not to exceed  
13 three persons in any one fiscal year to grades in the Regular  
14 Corps of the Service above that of senior assistant, but not  
15 to a grade above that of director; and for purposes of pay and  
16 pay period any person appointed under the provisions of this  
17 section shall be considered as having had on the date of ap-  
18 pointment service equal to that of the junior officer of the  
19 grade to which appointed.

20 (c) In accordance with regulations, special consultants  
21 may be employed to assist and advise in the operations of the  
22 Service. Such consultants may be appointed without regard  
23 to the civil-service laws and their compensation may be fixed  
24 without regard to the Classification Act of 1923, as amended.

25 (d) In accordance with regulations, individual scientists,

1 other than commissioned officers of the Service, may be des-  
2 igned by the Surgeon General to receive fellowships, ap-  
3 pointed for duty with the Service without regard to the  
4 civil-service laws and compensated without regard to the  
5 Classification Act of 1923, as amended, may hold their fel-  
6 lowships under conditions prescribed therein, and may be  
7 assigned for studies or investigations either in this country  
8 or abroad during the terms of their fellowships.

9 (e) Persons who are not citizens may be employed as  
10 consultants pursuant to subsection (c) and may be appointed  
11 to fellowships pursuant to subsection (d). Unless other-  
12 wise specifically provided, any prohibition in any other Act  
13 against the employment of aliens, or against the payment  
14 of compensation to them, shall not be applicable in the case  
15 of persons employed or appointed pursuant to such subsec-  
16 tions.

17 (f) The appointment of any officer or employee of the  
18 Service made in accordance with the civil-service laws shall  
19 be made by the Administrator, and may be made effective  
20 as of the date on which such officer or employee enters upon  
21 duty.

22

#### PAY AND ALLOWANCES

23 SEC. 209. (a) Commissioned officers of the Regular  
24 Corps shall receive such pay and allowances as are or may  
25 hereafter be provided by law.



1       (b) Reserve officers shall receive the same pay and  
2 allowances when on active duty as commissioned officers of  
3 the Regular Corps, including allowances for travel and trans-  
4 portation of household goods and effects.

5       (c) In accordance with regulations of the President,  
6 commissioned officers of the Regular Corps and officers of  
7 the Reserve on active duty may make allotments from their  
8 pay and may be granted leaves of absence without any de-  
9 duction from their pay. Such officers shall also be permitted  
10 to purchase quartermaster supplies from the Army, Navy,  
11 and Marine Corps at the same price as is charged officers  
12 of the Army, Navy, and Marine Corps.

13       (d) Female commissioned officers of the Service shall  
14 receive the same pay and allowances as male officers of  
15 corresponding grades, including allowances for dependents,  
16 except that no allowance shall be paid to any female com-  
17 missioned officer on account of any dependent who is not in  
18 fact dependent upon such officer for his or her chief sup-  
19 port. For the purposes of this subsection the term "depend-  
20 ent" shall include a husband, father, mother, and unmarried  
21 children (including stepchildren and adopted children)  
22 under twenty-one years of age.

23       (e) Members of the National Advisory Health Council  
24 and members of the National Advisory Cancer Council, other  
25 than ex officio members, while attending conferences or

1 meetings of their respective Councils or while otherwise serv-  
2 ing at the request of the Surgeon General, shall be entitled  
3 to receive compensation at a rate to be fixed by the Adminis-  
4 trator, but not exceeding \$25 per diem, and shall also be  
5 entitled to receive an allowance for actual and necessary  
6 traveling and subsistence expenses while so serving away  
7 from their places of residence.

8 (f) Field employees of the Service, except those em-  
9 ployed on a per diem or fee basis, who render part-time duty  
10 and are also subject to call at any time for services not  
11 contemplated in their regular part-time employment,  
12 may be paid annual compensation for such part-time duty  
13 and, in addition, such fees for such other services as the  
14 Surgeon General may determine; but in no case shall the  
15 total paid to any such employee for any fiscal year exceed  
16 the amount of the minimum annual salary rate of the classifi-  
17 cation grade of the employee.

18 (g) Whenever any commissioned or other officer or  
19 employee of the Service is assigned for duty which the  
20 Surgeon General finds requires intimate contact with persons  
21 afflicted with leprosy, he may receive, as provided by regula-  
22 tions of the President, in addition to the pay and any allow-  
23 ances of his grade, not more than one-half the pay of  
24 such grade, and such allowances or increased allowances  
25 as may be provided for by such regulations.

1 (h) Individuals appointed under section 208 (d) shall  
2 have included in their fellowships such stipends or allowances,  
3 including travel and subsistence expenses, as the Surgeon  
4 General may deem necessary to procure qualified fellows.

5 PROMOTIONS AND SEPARATION OF COMMISSIONED OFFICERS  
6 IN THE REGULAR CORPS

7 SEC. 210. (a) Promotions of commissioned officers of  
8 the Regular Corps to any grade up to and including the direc-  
9 tor grade shall be made only after examination given in  
10 accordance with regulations of the President and shall be  
11 made according to the same length of service as is now or may  
12 hereafter be prescribed for promotion of officers of correspond-  
13 ing grades of the Medical Corps of the Army, except that—

14 (1) In time of war, or of national emergency pro-  
15 claimed by the President, any commissioned officer of the  
16 Regular Corps may be appointed to a higher temporary  
17 grade with the pay and allowances thereof without  
18 examination and without vacating his permanent  
19 appointment, and, if his service shall have been con-  
20 tinuous, without renewing his oath of office;

21 (2) For purposes of promotion, an officer whose  
22 original appointment to the Regular Corps was above  
23 the assistant grade shall be considered as having had on  
24 the date of such original appointment service equal to  
25 that of the junior officer of the grade to which he was



1 appointed, except that if his active commissioned service  
2 in the Service exceeds that of the junior officer of the  
3 grade, such service (not exceeding ten years for an  
4 officer appointed in the senior assistant grade and four-  
5 teen years for an officer appointed in the full grade)  
6 shall be credited for purposes of promotion;

7 (3) Officers commissioned in the grade of junior  
8 assistant shall be examined for promotion after not more  
9 than two years of service and if qualified shall be pro-  
10 moted to the next higher grade; and

11 (4) Commissioned officers other than medical,  
12 dental, sanitary engineering, and pharmacist officers shall  
13 be promoted in accordance with regulations of the Presi-  
14 dent.

15 (b) At the end of his first three years of service, the  
16 record of each commissioned officer in the Regular Corps  
17 originally appointed in or above the grade of senior assistant  
18 shall be reviewed in accordance with regulations of the  
19 President and if found not fully qualified for further service  
20 he shall be separated from the Service and paid six months'  
21 pay and allowances.

22 (c) When a commissioned officer in the Regular Corps  
23 is found, after examination, to be not qualified for promo-  
24 tion for reasons other than physical disability incurred in  
25 line of duty—

26 (1) If below the full grade he shall be separated

1 from the Service, and if in the assistant grade he shall  
2 be separated and paid six months' pay and allowances,  
3 and if in the senior assistant grade he shall be separated  
4 and paid one year's pay and allowances; and

5 (2) If in the full or senior grade he shall be reported  
6 as not in line of promotion, or shall be retired and paid  
7 at the rate of  $2\frac{1}{2}$  per centum for each complete year of  
8 active commissioned service in the Service, but in no  
9 case to exceed 60 per centum of his active pay at the  
10 time he is retired.

#### 11 RETIREMENT OF COMMISSIONED OFFICERS

12 SEC. 211. (a) A commissioned officer of the Regular  
13 Corps retired for disability from disease or injury incurred  
14 in line of duty, or a commissioned officer of the Reserve  
15 Corps retired for disability from disease or injury incurred  
16 in line of duty in time of war, shall be entitled, except as  
17 provided in subsection (c), to receive retired pay at the  
18 rate of 75 per centum of his active pay at the time of  
19 retirement.

20 (b) A commissioned officer shall be retired on the first  
21 day of the month following his sixty-fourth birthday. If he  
22 is an officer in the Regular Corps, he shall, except as pro-  
23 vided in subsection (c), be entitled to receive retired pay  
24 at the rate of 75 per centum of his active pay at the time of  
25 retirement.

1       (c) (1) Any commissioned officer of the Regular  
2 Corps who at the time of his original appointment was more  
3 than forty-five years of age shall upon retirement, unless  
4 retired for disability from disease or injury incurred in time  
5 of war, be entitled to retired pay only at the rate of 4 per  
6 centum of his active pay at the time of retirement for each  
7 twelve months of active commissioned service, including  
8 any such service in the Army, Navy, or Coast Guard, but  
9 in no case more than 75 per centum of such active pay.

10       (2) The retired pay of any commissioned officer who  
11 has served four years or more as Surgeon General or Deputy  
12 Surgeon General shall be based on the pay of the highest  
13 grade held by him as such Surgeon General or Deputy  
14 Surgeon General.

15       (3) The retired pay of an officer of the Regular Corps  
16 who has failed, by reason of disability incurred in line of duty,  
17 to receive a promotion to which he would otherwise have  
18 been entitled, shall be based on the pay of the grade to which,  
19 but for such disability, he would have been promoted.

20       (d) An officer retired for disability who is found to have  
21 recovered from his disability, and in time of war an officer  
22 who has been retired for age, may in accordance with regula-  
23 tions of the President be recalled to active duty.

24       (e) With the approval of the President a commissioned  
25 officer who has served four years or more as Surgeon General



1 and who has had not less than twenty-five years of active  
2 commissioned service in the Service may retire voluntarily,  
3 either at the termination of his term as Surgeon General or  
4 at any time thereafter; and his retired pay shall be at the  
5 rate of 75 per centum of the pay of the highest grade held  
6 by him as such Surgeon General.

7 (f) Commissioned officers of the Reserve Corps, while on  
8 active duty, shall be deemed to be officers of the executive  
9 branch of the Government within the meaning of section 3  
10 of the Civil Service Retirement Act, as amended (U. S. C.,  
11 1940 edition, title 5, section 693).

#### 12 MILITARY BENEFITS

13 SEC. 212. (a) For the purposes of this section—

14 (1) the term “full military benefits” means all  
15 rights, privileges, immunities, and benefits provided  
16 under any law of the United States in the case of  
17 commissioned officers of the Army (including their sur-  
18 viving beneficiaries) on account of active military  
19 service, including, but not limited to, burial payments  
20 in the event of death, six months’ pay in case of death,  
21 veterans’ compensation and pensions and other veterans’  
22 benefits, the rights provided under the Soldiers’ and  
23 Sailors’ Civil Relief Act, as amended, and under the  
24 National Service Life Insurance Act, as amended, travel

1 allowances, including per diem allowances for travel  
2 without regard to repeated travel between two or more  
3 places in the same vicinity, exemption from payment  
4 of postage on mail, exemption of certain pay  
5 from Federal income taxation, and other benefits,  
6 privileges and exceptions under the Internal Revenue  
7 laws; excluding, however, retired pay, uniform allow-  
8 ances, the right to be awarded military ribbons, medals,  
9 and decorations, and the benefits of the Mustering-out  
10 Payment Act of 1944, and excluding reemployment  
11 rights with respect to any commissioned officer of the  
12 Service except officers of the Reserve Corps called to  
13 active duty after November 11, 1943; and

14 (2) the term "limited military benefits" means  
15 full military benefits, except veterans' compensation and  
16 pensions and other veterans' benefits, and eligibility  
17 under the National Service Life Insurance Act, as  
18 amended.

19 (b) Commissioned officers of the Service (including  
20 their surviving beneficiaries) —

21 (1) shall be entitled to limited military benefits  
22 with respect to all active service in time of war;

23 (2) shall be entitled to full military benefits with  
24 respect to active service performed while detailed for  
25 duty with the Army, Navy, or Coast Guard;

(3) shall be entitled to full military benefits with respect to active service outside the continental limits of the United States, or in Alaska, in time of war;

(4) shall be entitled to full military benefits with respect to active service performed while the Service is part of the military forces of the United States pursuant to executive order of the President.

(c) The authority vested by law in the War Department, the Secretary of War, or other officers of the War Department with respect to rights, privileges, immunities, and benefits referred to in subsection (a) shall be exercised, with respect to commissioned officers of the Service, by the Surgeon General under the supervision and direction of the Administrator.

(d) The President may prescribe the conditions under which commissioned officers of the Service may be awarded military ribbons, medals, and decorations.

#### ALLOWANCES FOR UNIFORMS

SEC. 213. An allowance of \$250 for uniforms and equipment is authorized to be paid to each commissioned officer of the Service who is hereafter, in time of war, appointed to the Regular Corps or called to active duty in the Reserve Corps, or who is hereafter on active duty in either corps at the commencement of any war, if at such time the officer is in the grade of junior assistant, assistant, or senior assistant,



1 and is receiving the pay of the first, second, or third pay  
2 period; except that no officer who has received such an  
3 allowance from the Service shall at any time thereafter be  
4 entitled to any further allowance.

5  
6 DETAIL OF PERSONNEL

6 SEC. 214. (a) The Administrator is authorized, upon  
7 the request of the head of an executive department, to de-  
8 tail officers or employees of the Service to such department  
9 for duty as agreed upon by the Administrator and the head  
10 of such department in order to cooperate in, or conduct  
11 work related to, the functions of such department or of the  
12 Service. When officers or employees are so detailed their  
13 salaries and allowances may be paid from working funds  
14 established as provided by law or may be paid by the Service  
15 from applicable appropriations and reimbursement may be  
16 made as agreed upon by the Administrator and the head of  
17 the executive department concerned. Officers detailed for  
18 duty with the Army, Navy, or Coast Guard shall be sub-  
19 ject to the laws for the government of the service to which  
20 detailed.

21 (b) Upon the request of any State health authority,  
22 personnel of the Service may be detailed by the Surgeon  
23 General for the purpose of assisting such State or a political  
24 subdivision thereof in work related to the functions of the  
25 Service.

1 (c) The Surgeon General may detail personnel of the  
2 Service to nonprofit educational, research, or other institu-  
3 tions engaged in health activities for special studies of scien-  
4 tific problems and for the dissemination of information  
5 relating to public health.

6 (d) Personnel detailed under subsections (b) and (c)  
7 shall be paid from applicable appropriations of the Service,  
8 except that, in accordance with regulations such personnel  
9 may be placed on leave without pay and paid by the State,  
10 subdivision, or institution to which they are detailed. The  
11 services of personnel while detailed pursuant to this section  
12 shall be considered as having been performed in the Service  
13 for purposes of longevity pay, promotion, retirement, com-  
14 pensation for injury or death, and the benefits provided by  
15 section 212.

#### 16 REGULATIONS

17 SEC. 215. (a) The President shall from time to time  
18 prescribe regulations with respect to the appointment, pro-  
19 motion, retirement, termination of commission, titles, pay,  
20 uniforms, allowances (including increased allowances for  
21 foreign service), and discipline of the commissioned corps  
22 of the Service.

23 (b) The Surgeon General, with the approval of the  
24 Administrator, unless specifically otherwise provided, shall  
25 promulgate all other regulations necessary to the administra-

tion of the Service, including regulations with respect to travel, transportation of household goods and effects, allotments from their pay by commissioned officers, and uniforms for employees, and regulations with respect to the custody, use, and preservation of the records, papers, and property of the Service.

(c) No regulation relating to qualifications for appointment of medical officers or employees shall give preference to any school of medicine.

#### USE OF SERVICE IN EMERGENCY

SEC. 216. In time of war, or of emergency proclaimed by the President, he may utilize the Service to such extent and in such manner as shall in his judgment promote the public interest, and in time of war he may by Executive order declare the commissioned corps of the Service to be a military service. Upon such declaration, and during the period of such war or such part thereof as the President shall prescribe, the commissioned corps (1) shall constitute a branch of the land and naval forces of the United States, and (2) to the extent prescribed by regulations of the President, shall be subject to the Articles of War and to the Articles for the Government of the Navy: *Provided*, That during such period or part thereof the commissioned corps shall continue to operate as part of the Service except to the extent that the President may direct as Commander in Chief.



## 1 NATIONAL ADVISORY HEALTH AND CANCER COUNCILS

2 SEC. 217. (a) The National Advisory Health Council  
3 shall consist of fourteen members. The Director of the Na-  
4 tional Institute of Health, and three experts, one each from  
5 the Army, the Navy, and the Bureau of Animal Industry, to  
6 be detailed by the Secretary of War, the Secretary of the  
7 Navy, and the Secretary of Agriculture, respectively, shall be  
8 ex officio members of the Council. The Surgeon General,  
9 with the approval of the Administrator, shall appoint, without  
10 regard to the civil-service laws, ten members of the Coun-  
11 cil who shall be persons, not otherwise in the employ of  
12 the United States, skilled in the sciences related to health.  
13 Each appointed member shall hold office for a term of  
14 five years, except that any member appointed to fill a  
15 vacancy occurring prior to the expiration of the term for  
16 which his predecessor was appointed shall be appointed for  
17 the remainder of such term. An appointed member shall not  
18 be eligible to serve continuously for more than five years  
19 but shall be eligible for reappointment if he has not served  
20 immediately preceding his reappointment.

21 (b) The National Advisory Health Council shall advise,  
22 consult with, and make recommendations to, the Surgeon  
23 General on matters relating to health activities and functions  
24 of the Service. The Surgeon General is authorized to utilize  
25 the services of any member or members of the Council, and

1 where appropriate, any member or members of the National  
2 Advisory Cancer Council in connection with matters related  
3 to the work of the Service, for such periods, in addition to  
4 conference periods, as he may determine.

5 (c) The National Advisory Cancer Council shall consist  
6 of the Surgeon General ex officio, who shall be Chairman, and  
7 of six members to be appointed without regard to the civil-  
8 service laws by the Surgeon General with the approval of the  
9 Administrator. The six appointed members shall be selected  
10 from leading medical or scientific authorities who are out-  
11 standing in the study, diagnosis, or treatment of cancer. Each  
12 appointed member shall hold office for a term of three years,  
13 except that any member appointed to fill a vacancy occurring  
14 prior to the expiration of the term for which his predecessor  
15 was appointed shall be appointed for the remainder of such  
16 term. An appointed member shall not be eligible to serve  
17 continuously for more than three years but shall be eligible  
18 for reappointment if he has not served immediately preceding  
19 his reappointment.

20 TITLE III—GENERAL POWERS AND DUTIES OF  
21 PUBLIC HEALTH SERVICE

22 PART A—RESEARCH AND INVESTIGATIONS

23 IN GENERAL

24 SEC. 301. The Surgeon General shall conduct in the  
25 Service, and encourage, cooperate with, and render assistance

1 to other appropriate public authorities, scientific institutions,  
2 and scientists in the conduct of, and promote the coordination  
3 of, research, investigations, experiments, demonstrations, and  
4 studies relating to the causes, diagnosis, treatment, control,  
5 and prevention of physical and mental diseases and impair-  
6 ments of man, including water purification, sewage treatment,  
7 and pollution of lakes and streams. In carrying out the fore-  
8 going the Surgeon General is authorized to—

9       (a) Collect and make available through publications  
10 and other appropriate means, information as to, and the  
11 practical application of, such research and other activities;

12       (b) Make available research facilities of the Service  
13 to appropriate public authorities, and to health officials  
14 and scientists engaged in special study;

15       (c) Establish and maintain research fellowships in  
16 the Service with such stipends and allowances, including  
17 traveling and subsistence expenses, as he may deem  
18 necessary to procure the assistance of the most brilliant  
19 and promising research fellows from the United States  
20 and abroad;

21       (d) Make grants in aid to universities, hospitals,  
22 laboratories, and other public or private institutions, and  
23 to individuals for such research projects as are recom-  
24 mended by the National Advisory Health Council, or,



1 with respect to cancer, recommended by the National  
2 Advisory Cancer Council;

3 (e) Secure from time to time and for such periods  
4 as he deems advisable, the assistance and advice of  
5 experts, scholars, and consultants from the United States  
6 or abroad;

7 (f) For purposes of study, admit and treat at in-  
8 stitutions, hospitals, and stations of the Service, persons  
9 not otherwise eligible for such treatment; and

10 (g) Adopt, upon recommendation of the National  
11 Advisory Health Council, or, with respect to cancer,  
12 upon recommendation of the National Advisory Cancer  
13 Council, such additional means as he deems necessary  
14 or appropriate to carry out the purposes of this section.

15 NARCOTICS

16 SEC. 302. (a) In carrying out the purposes of section  
17 301 with respect to narcotics, the studies and investigations  
18 shall include the use and misuse of narcotic drugs, the  
19 quantities of crude opium, coca leaves, and their salts, de-  
20 rivatives, and preparations, together with reserves thereof,  
21 necessary to supply the normal and emergency medicinal  
22 and scientific requirements of the United States. The results  
23 of studies and investigations of the quantities of crude opium,  
24 coca leaves, or other narcotic drugs, together with such re-  
25 serves thereof, as are necessary to supply the normal and

1 emergency medicinal and scientific requirements of the  
2 United States, shall be reported not later than the 1st day  
3 of September each year to the Secretary of the Treasury,  
4 to be used at his discretion in determining the amounts of  
5 crude opium and coca leaves to be imported under the Nar-  
6 cotic Drugs Import and Export Act, as amended.

7 (b) The Surgeon General shall cooperate with States  
8 for the purpose of aiding them to solve their narcotic drug  
9 problems and shall give authorized representatives of the  
10 States the benefit of his experience in the care, treatment, and  
11 rehabilitation of narcotic addicts to the end that each State  
12 may be encouraged to provide adequate facilities and methods  
13 for the care and treatment of its narcotic addicts.

14 PART B—FEDERAL-STATE COOPERATION

15 IN GENERAL

16 SEC. 311. The Surgeon General is authorized to accept  
17 from State and local authorities any assistance in the enforce-  
18 ment of quarantine regulations made pursuant to this Act  
19 which such authorities may be able and willing to provide.  
20 The Surgeon General shall also assist States and their political  
21 subdivisions in the prevention and suppression of communi-  
22 cable diseases, shall cooperate with and aid State and local  
23 authorities in the enforcement of their quarantine and other  
24 health regulations and in carrying out the purposes specified  
25 in section 314, and shall advise the several States on matters

1 relating to the preservation and improvement of the public  
2 health.

3 HEALTH CONFERENCES

4 SEC. 312. A conference of the health authorities of the  
5 several States shall be called annually by the Surgeon Gen-  
6 eral. Whenever in his opinion the interests of the public  
7 health would be promoted by a conference, the Surgeon  
8 General may invite as many of such health authorities to con-  
9 fer as he deems necessary or proper. Upon the application  
10 of health authorities of five or more States it shall be the duty  
11 of the Surgeon General to call a conference of all State and  
12 Territorial health authorities joining in the request. Each  
13 State represented at any conference shall be entitled to a  
14 single vote.

15 COLLECTION OF VITAL STATISTICS

16 SEC. 313. To secure uniformity in the registration of  
17 mortality, morbidity, and vital statistics the Surgeon General  
18 shall prepare and distribute suitable and necessary forms for  
19 the collection and compilation of such statistics which shall  
20 be published as a part of the health reports published by the  
21 Surgeon General.

22 GRANTS AND SERVICES TO STATES

23 SEC. 314. (a) To enable the Surgeon General to carry  
24 out the purposes of section 301 with respect to developing  
25 more effective measures for the prevention, treatment, and



1 control of venereal diseases, and to assist, through grants and  
2 as otherwise provided in this section, States, counties, health  
3 districts, and other political subdivisions of the States in  
4 establishing and maintaining adequate measures for the pre-  
5 vention, treatment, and control of such diseases, including the  
6 training of personnel for State and local health work, and to  
7 enable him to prevent and control the spread of the venereal  
8 diseases in interstate traffic, and to meet the cost of pay,  
9 allowances, and traveling expenses of commissioned officers  
10 and other personnel of the Service detailed to assist in  
11 carrying out the purposes of this section with respect to the  
12 venereal diseases, and to administer this section with respect  
13 to such diseases, there is hereby authorized to be appro-  
14 priated for each fiscal year a sum sufficient to carry out  
15 the purposes of this subsection.

16 (b) To enable the Surgeon General to assist, through  
17 grants and as otherwise provided in this section, States,  
18 counties, health districts, and other political subdivisions of  
19 the States in establishing and maintaining adequate public  
20 health services, including grants for demonstrations and for  
21 the training of personnel for State and local health work,  
22 there is hereby authorized to be appropriated for each fiscal  
23 year a sum not to exceed \$20,000,000. Of the sum appro-  
24 priated for each fiscal year pursuant to this subsection there  
25 shall be available an amount, not to exceed \$2,000,000, to

1 enable the Surgeon General to provide demonstrations and  
2 to train personnel for State and local health work and to  
3 meet the cost of pay, allowances, and traveling expenses  
4 of commissioned officers and other personnel of the Service  
5 detailed to assist States in carrying out the purposes of this  
6 subsection.

7 (c) For each fiscal year, the Surgeon General, with the  
8 approval of the Administrator, shall determine the total sum  
9 from the appropriation under subsection (a) and the total  
10 sum from the appropriation under subsection (b) which  
11 shall be available for allotment among the several States.  
12 He shall, in accordance with regulations, from time to time  
13 make allotments from such sums to the several States on  
14 the basis of (1) the population, (2) the size of the venereal-  
15 disease problem and the size of other special health problems,  
16 respectively, and (3) the financial need of the respective  
17 States. Upon making such allotments the Surgeon General  
18 shall notify the Secretary of the Treasury of the amounts  
19 thereof.

20 (d) The Surgeon General, with the approval of the  
21 Administrator, shall from time to time determine the amounts  
22 to be paid to each State from the allotments to such State,  
23 and shall certify to the Secretary of the Treasury, the amounts  
24 so determined, reduced or increased, as the case may be, by  
25 the amounts by which he finds that estimates of required

1 expenditures with respect to any prior period were greater  
2 or less than the actual expenditures for such period. Upon  
3 receipt of such certification, the Secretary of the Treasury  
4 shall, through the Division of Disbursement of the Treasury  
5 Department and prior to audit or settlement by the General  
6 Accounting Office, pay in accordance with such certification.

7 (e) The moneys so paid to any State shall be ex-  
8 pended solely in carrying out the purposes specified in sub-  
9 section (a) or subsection (b) of this section, as the case  
10 may be, and in accordance with plans presented by the  
11 health authority of such State and approved by the Surgeon  
12 General.

13 (f) Money so paid shall be paid upon the condition that  
14 there shall be spent in such State for the same general pur-  
15 pose from funds of such State and its political subdivisions  
16 an amount determined in accordance with regulations.

17 (g) Whenever the Surgeon General, after reasonable  
18 notice and opportunity for hearing to the health authority of  
19 the State, finds that, with respect to money paid to the State  
20 out of appropriations under subsection (a) or subsection  
21 (b), as the case may be, there is a failure to comply sub-  
22 stantially with either—

- 23 (1) the provisions of this section;  
24 (2) the plan submitted under subsection (e); or  
25 (3) the regulations;



1 the Surgeon General shall notify such State health authority  
2 either that further payments will not be made to the State  
3 from appropriations under such subsection (or in his discre-  
4 tion that further payments will not be made to the State  
5 from such appropriations for activities in which there is such  
6 failure), until he is satisfied that there will no longer be any  
7 such failure. Until he is so satisfied the Surgeon General  
8 shall make no further certification for payment to such State  
9 from appropriations under such subsection, or shall limit  
10 payment to activities in which there is no such failure.

11 (h) All regulations and amendments thereto with re-  
12 spect to grants to States under this section shall be made  
13 after consultation with a conference of the State health  
14 authorities. Insofar as practicable, the Surgeon General shall  
15 obtain the agreement of the State health authorities prior to  
16 the issuance of any such regulations or amendments.

17 (i) Funds appropriated under subsection (a) of this  
18 section, in addition to being available for payments to States,  
19 shall also be available for expenditure by the Surgeon Gen-  
20 eral in otherwise carrying out such subsection, including  
21 expenditures for printing and binding of the findings of  
22 investigations, and for pay and allowances and traveling  
23 expenses of personnel of the Service engaged in activities  
24 authorized by such subsection.

## 1 HEALTH EDUCATION AND INFORMATION

2 SEC. 315. From time to time the Surgeon General shall  
3 issue information related to public health, in the form of publi-  
4 cations or otherwise, for the use of the public, and shall  
5 publish weekly reports of health conditions in the United  
6 States and other countries and other pertinent health informa-  
7 tion for the use of persons and institutions engaged in work  
8 related to the functions of the Service.

## 9 PART C—HOSPITALS, MEDICAL EXAMINATIONS, AND

## 10 MEDICAL CARE

## 11 HOSPITALS

12 SEC. 321. The Surgeon General, pursuant to regulations,  
13 shall—

14 (a) Control, manage, and operate all institutions,  
15 hospitals, and stations of the Service, and provide for  
16 the care, treatment and hospitalization of patients, includ-  
17 ing the furnishing of prosthetic and orthopedic devices;

18 (b) Provide for the transfer of Public Health Serv-  
19 ice patients, in the care of attendants where necessary,  
20 between hospitals and stations operated by the Service  
21 or between such hospitals and stations and other hos-  
22 pitals and stations in which Public Health Service  
23 patients may be received, and the payment of expenses  
24 of such transfer;

(c) Provide for the disposal of articles produced by patients in the course of their curative treatment, either by allowing the patient to retain such articles or by selling them and depositing the money received therefor to the credit of the appropriation from which the materials for making the articles were purchased; and

(d) Provide for the disposal of money and effects,  
in the custody of the hospitals or stations, of deceased  
patients.

11 CARE AND TREATMENT OF SEAMEN AND CERTAIN OTHER  
12 PERSONS

13 SEC. 322. (a) The following persons shall be entitled,  
14 in accordance with regulations, to medical, surgical, and  
15 dental treatment and hospitalization without charge at hos-  
16 pitals and other stations of the Service:

(1) Seamen employed on vessels of the United States registered, enrolled, and licensed under the maritime laws thereof, other than canal boats engaged in the coasting trade;

(2) Seamen employed on United States or foreign  
flag vessels as employees of the United States through  
the War Shipping Administration;

(3) Seamen, not enlisted or commissioned in the military or naval establishments, who are employed on



1 State school ships or on vessels of the United States  
2 Government of more than five tons' burden;

3 (4) Cadets at State maritime academies or on State  
4 training ships;

5 (5) Seamen on vessels of the Mississippi River  
6 Commission and, upon application of their commanding  
7 officers, officers and crews of vessels of the Fish and  
8 Wildlife Service;

9 (6) Enrollees in the United States Maritime Service  
10 on active duty and members of the Merchant Marine  
11 Cadet Corps; and

12 (7) Employees and noncommissioned officers in the  
13 field service of the Public Health Service when injured  
14 or taken sick in line of duty.

15 (b) When suitable accommodations are available, sea-  
16 men on foreign-flag vessels may be given medical, surgical,  
17 and dental treatment and hospitalization on application of  
18 the master, owner, or agent of the vessel at hospitals and  
19 other stations of the Service at rates fixed by regulations.  
20 All expenses connected with such treatment, including burial  
21 in the event of death, shall be paid by such master, owner,  
22 or agent. No such vessel shall be granted clearance until  
23 such expenses are paid or their payment appropriately guar-  
24 anteed to the Collector of Customs.

25 (c) Any person when detained in accordance with quar-

1 antine laws, or, at the request of the Immigration and Natu-  
2 ralization Service, any person detained by that Service, may  
3 be treated and cared for by the Public Health Service.

4 (d) Persons not entitled to treatment and care at insti-  
5 tutions, hospitals, and stations of the Service may, in accord-  
6 ance with regulations of the Surgeon General, be admitted  
7 thereto for temporary treatment and care in case of  
8 emergency.

9 (e) Persons entitled to care and treatment under subsec-  
10 tion (a) of this section may, in accordance with regulations,  
11 receive such care and treatment at the expense of the Service  
12 from public or private medical or hospital facilities other than  
13 those of the Service, when authorized by the officer in charge  
14 of the station at which the application is made.

15 CARE AND TREATMENT OF FEDERAL PRISONERS

16 SEC. 323. The Service shall supervise and furnish med-  
17 ical treatment and other necessary medical, psychiatric, and  
18 related technical and scientific services, authorized by the  
19 Act of May 13, 1930, as amended (U. S. C., 1940 edition,  
20 title 18, secs. 751, 752), in penal and correctional in-  
21 stitutions of the United States.

22 EXAMINATION AND TREATMENT OF FEDERAL EMPLOYEES

23 SEC. 324. The Surgeon General is authorized to provide  
24 at institutions, hospitals, and stations of the Service medical,  
25 surgical, and hospital services and supplies for persons en-

1 titled to treatment under the United States Employees' Com-  
2 pension Act and extensions thereof. The Surgeon General  
3 may also provide for making medical examinations of—

4 (a) employees of the Alaska Railroad and employ-  
5 ees of the Federal Government for retirement purposes;

6 (b) employees in the Federal classified service, and  
7 applicants for appointment, as requested by the Civil  
8 Service Commission for the purpose of promoting health  
9 and efficiency;

10 (c) seamen for purposes of qualifying for cer-  
11 tificates of service; and

12 (d) employees eligible for benefits under the  
13 Longshoremen's and Harbor Workers' Compensation  
14 Act, as amended (U. S. C., 1940 edition, title 33,  
15 chapter 18), as requested by any deputy commis-  
16 sioner thereunder.

17 EXAMINATION OF ALIENS

18 SEC. 325. The Surgeon General shall provide for making,  
19 at places within the United States or in other countries,  
20 such physical and mental examinations of aliens as are  
21 required by the immigration laws, subject to administra-  
22 tive regulations prescribed by the Attorney General and  
23 medical regulations prescribed by the Surgeon General with  
24 the approval of the Administrator.



1 SERVICES TO COAST GUARD, COAST AND GEODETIC SURVEY,  
2 AND PUBLIC HEALTH SERVICE

3 SEC. 326. (a) Subject to regulations of the President—

4 (1) commissioned officers, chief warrant officers,  
5 warrant officers, cadets, and enlisted personnel of the  
6 Regular Coast Guard, including those on shore duty  
7 and those on detached duty, whether on active duty  
8 or retired; and Regular and temporary members of  
9 the United States Coast Guard Reserve when on active  
10 duty or when retired for disability;

11 (2) commissioned officers, ships' officers, and  
12 members of the crews of vessels of the United States  
13 Coast and Geodetic Survey, including those on shore  
14 duty and those on detached duty, whether on active  
15 duty or retired; and

16 (3) commissioned officers of the Regular Corps  
17 of the Public Health Service, whether on active duty  
18 or retired, and commissioned officers of the Reserve  
19 Corps when on active duty or when retired for dis-  
20 ability;

21 shall be entitled to medical, surgical, and dental treatment  
22 and hospitalization by the Service. The Surgeon General  
23 may detail commissioned officers for duty aboard vessels of  
24 the Coast Guard or the Coast and Geodetic Survey.

25 (b) Subject to regulations of the President, the depend-

ent members of families (as defined in such regulations) of persons specified in subsection (a), other than temporary members of the United States Coast Guard Reserve, shall be furnished medical advice and out-patient treatment by the Service at its hospitals and relief stations, and they shall also be furnished hospitalization at hospitals of the Service, if suitable accommodations are available, at a per diem cost to the officer, enlisted person, or member of a crew concerned. Such cost shall be at such uniform rate as may be prescribed in such regulations of the President.

(c) The Service shall provide all services referred to in subsection (a) required by the Coast Guard and shall perform all duties prescribed by statute in connection with the examinations to determine physical or mental condition for purposes of appointment, enlistment, and reenlistment, promotion and retirement, and officers of the Service assigned to duty on Coast Guard vessels may extend aid to the crews of American vessels engaged in deep-sea fishing.

#### INTERDEPARTMENTAL WORK

SEC. 327. Nothing contained in this part shall affect the authority of the Service to furnish any materials, supplies, or equipment, or perform any work or services, requested in accordance with section 7 of the Act of May 21, 1920, as amended (U. S. C., 1940 edition, title 31, sec. 686), or the authority of any other executive department

1 to furnish any materials, supplies, or equipment, or perform  
2 any work or services, requested by the Federal Security  
3 Agency for the Service in accordance with that section.

4 PART D—LEPERS

5 RECEIPT OF LEPERS

6 SEC. 331. The Service shall, in accordance with regu-  
7 lations, receive into any hospital of the Service suitable for  
8 his accommodation any person afflicted with leprosy who  
9 presents himself for care, detention, or treatment, or who may  
10 be apprehended under section 332 or 361 of this Act, and  
11 any person afflicted with leprosy duly consigned to the care  
12 of the Service by the proper health authority of any State,  
13 Territory, or the District of Columbia. The Surgeon General  
14 is authorized, upon the request of any health authority, to  
15 send for any person within the jurisdiction of such authority  
16 who is afflicted with leprosy and to convey such person to the  
17 appropriate hospital for detention and treatment. When the  
18 transportation of any such person is undertaken for the pro-  
19 tection of the public health the expense of such removal shall  
20 be met from funds available for the maintenance of hospitals  
21 of the Service.

22 APPREHENSION, DETENTION, TREATMENT, AND RELEASE

23 SEC. 332. The Surgeon General may provide by regu-  
24 lation for the apprehension, detention, treatment, and release  
25 of persons being treated by the Service for leprosy.



## PART E—NARCOTICS ADDICTS

## CARE AND TREATMENT

SEC. 341. The Surgeon General is authorized to provide for the confinement, care, protection, treatment, and discipline of persons addicted to the use of habit-forming narcotic drugs who voluntarily submit themselves for treatment and addicts who have been or are hereafter convicted of offenses against the United States, including persons convicted by general courts martial and consular courts. Such care and treatment shall be provided at hospitals of the Service especially equipped for the accommodation of such patients and shall be designed to rehabilitate such persons, to restore them to health, and, where necessary, to train them to be self-supporting and self-reliant.

## EMPLOYMENT OF ADDICTS

SEC. 342. Narcotic addicts in hospitals of the Service designated for their care shall be employed in such manner and under such conditions as the Surgeon General may direct. In such hospitals the Surgeon General may, in his discretion, establish industries, plants, factories, or shops for the production and manufacture of articles, commodities, and supplies for the United States Government. The Secretary of the Treasury may require any Government department, establishment, or other institution, for whom appropriations are

1 made directly or indirectly by the Congress of the United  
2 States, to purchase at current market prices, as determined  
3 by him or his authorized representative, such of the articles,  
4 commodities, or supplies so produced or manufactured as  
5 meet their specifications; and the Surgeon General shall pro-  
6 vide for payment to the inmates or their dependents of such  
7 pecuniary earnings as he may deem proper. The Adminis-  
8 trator shall establish a working-capital fund for such in-  
9 dustries, plants, factories, and shops out of any funds appro-  
10 priated for Public Health Service hospitals at which addicts  
11 are treated and cared for; and such fund shall be available  
12 for the purchase, repair, or replacement of machinery or  
13 equipment, for the purchase of raw materials and supplies,  
14 for the purchase of uniforms and other distinctive wearing  
15 apparel of employees in the performance of their official  
16 duties, and for the employment of necessary civilian officers  
17 and employees. The Surgeon General may provide for the  
18 disposal of products of the industrial activities conducted  
19 pursuant to this section, and the proceeds of any sales thereof  
20 shall be covered into the Treasury of the United States to  
21 the credit of the working-capital fund.

22 CONVICTS

23 SEC. 343. (a) The authority vested with the power to  
24 designate the place of confinement of a prisoner shall transfer  
25 to hospitals of the Service especially equipped for the ac-

1 commodation of addicts, if accommodations are available,  
2 all addicts who have been or are hereafter sentenced to con-  
3 finement, or who are now or shall hereafter be confined, in  
4 any penal, correctional, disciplinary, or reformatory institu-  
5 tion of the United States, including those addicts convicted  
6 of offenses against the United States who are confined in  
7 State and Territorial prisons, penitentiaries, and reformatories,  
8 except that no addict shall be transferred to a hospital of the  
9 Service who, in the opinion of the officer authorized to direct  
10 the transfer, is not a proper subject for confinement in such  
11 an institution either because of the nature of the crime he has  
12 committed or because of his apparent incorrigibility. The  
13 authority vested with the power to designate the place of  
14 confinement of a prisoner shall transfer from a hospital of the  
15 Service to the institution from which he was received, or to  
16 such other institution as may be designated by the proper  
17 authority, any addict whose presence at a hospital of the  
18 Service is detrimental to the well-being of the hospital or who  
19 does not continue to be a narcotic addict. All transfers of  
20 such prisoners to or from a hospital of the Service shall be  
21 accompanied by necessary attendants as directed by the  
22 officer in charge of such hospital and the actual and necessary  
23 expenses incident to such transfers shall be paid from the  
24 appropriation for the maintenance of such Service hospital  
25 except to the extent that other Federal agencies are author-



1 ized or required by law to pay expenses incident to such  
2 transfers. Whenever an alien addict transferred to a Serv-  
3 ice hospital pursuant to this subsection is entitled to his dis-  
4 charge but is subject to deportation, in lieu of being returned  
5 to the penal institution from which he came he shall be de-  
6 ported by the authority vested by law with power over  
7 deportation.

8 (b) The provisions of the Act of June 21, 1902, as  
9 amended (U. S. C., 1940 edition, title 18, secs. 710-712a),  
10 regulating commutation of sentence for good conduct of  
11 United States prisoners, section 8 of the Act of May 27, 1930  
12 (U. S. C., 1940 edition, title 18, sec. 744h), regulating  
13 commutation of sentence for employment in industry, and  
14 the Act of June 25, 1910, as amended (U. S. C., 1940  
15 edition, title 18, secs. 714-723c), relating to parole, shall be  
16 applicable to any narcotic addict confined in any institution  
17 in execution of a judgment or sentence upon conviction of  
18 an offense against the United States; except that no narcotic  
19 addict confined in any institution, whether or not an institu-  
20 tion of the Public Health Service, shall be released by reason  
21 of commutation of sentence or parole until the Surgeon  
22 General shall have certified that such individual is no longer  
23 an addict.

24 (c) Not later than one month prior to the expiration  
25 of the sentence of any addict confined in a Service hospital,

1 he shall be examined by the Surgeon General or his author-  
2 ized representative. If the Surgeon General believes the  
3 person to be discharged is still an addict and that he may by  
4 further treatment in a Service hospital be cured of his ad-  
5 diction, the addict shall be informed, in accordance with  
6 regulations, of the advisability of his submitting himself to  
7 further treatment. The addict may then apply in writing  
8 to the Surgeon General for further treatment in a Service  
9 hospital for a period not exceeding the maximum length of  
10 time considered necessary by the Surgeon General. Upon  
11 approval of the application by the Surgeon General or his  
12 authorized agent, the addict may be given such further  
13 treatment as is necessary to cure him of his addiction.

14 (d) Every person convicted of an offense against the  
15 United States, upon discharge, or upon release on parole,  
16 from a hospital of the Service, shall be furnished with the gra-  
17 tuities and transportation authorized by law to be furnished  
18 to prisoners upon release from a penal, correctional, disci-  
19 plinary, or reformatory institution.

20 (e) Any court of the United States having the power  
21 to suspend the imposition or execution of sentence and to  
22 place a defendant on probation under any existing laws may  
23 impose as one of the conditions of such probation that the  
24 defendant, if an addict, shall submit himself for treatment  
25 at a hospital of the Service especially equipped for the

1 accommodation of addicts until discharged therefrom as  
2 cured and that he shall be admitted thereto for such purpose.  
3 Upon the discharge of any such probationer from a hospital  
4 of the Service, he shall be furnished with the gratuities and  
5 transportation authorized by law to be furnished to prisoners  
6 upon release from a penal, correctional, disciplinary, or  
7 reformatory institution. The actual and necessary expense  
8 incident to transporting such probationer to such hospital  
9 and to furnishing such transportation and gratuities shall  
10 be paid from the appropriation for the maintenance of such  
11 hospital except to the extent that other Federal agencies  
12 are authorized or required by law to pay the cost of such  
13 transportation: *Provided*, That where existing law vests a  
14 discretion in any officer as to the place to which transporta-  
15 tion shall be furnished or as to the amount of clothing and  
16 gratuities to be furnished, such discretion shall be exercised  
17 by the Surgeon General with respect to addicts discharged  
18 from hospitals of the Service.

19 VOLUNTARY PATIENTS

20 SEC. 344. (a) Any addict, whether or not he shall have  
21 been convicted of an offense against the United States, may  
22 apply to the Surgeon General for admission to a hospital  
23 of the Service especially equipped for the accommodation  
24 of addicts.

25 (b) Any applicant shall be examined by the Surgeon



1 General who shall determine whether the applicant is an  
2 addict, whether by treatment in a hospital of the Service he  
3 may probably be cured of his addiction, and the estimated  
4 length of time necessary to effect his cure. The Surgeon  
5 General may, in his discretion, admit the applicant to a Serv-  
6 ice hospital. No such addict shall be admitted unless he  
7 agrees to submit to treatment for the maximum amount of  
8 time estimated by the Surgeon General to be necessary to  
9 effect a cure, and unless suitable accommodations are avail-  
10 able after all eligible addicts convicted of offenses against  
11 the United States have been admitted. Any such addict  
12 may be required to pay for his subsistence, care, and treat-  
13 ment at rates fixed by the Surgeon General and amounts so  
14 paid shall be covered into the Treasury of the United States  
15 to the credit of the appropriation from which the expenditure  
16 for his subsistence, care, and treatment was made.

17 (d) Any addict admitted for treatment under this sec-  
18 tion, including any addict, not convicted of an offense, who  
19 voluntarily submits himself for treatment, may be confined  
20 in a hospital of the Service for a period not exceeding the  
21 maximum amount of time estimated by the Surgeon General  
22 as necessary to effect a cure of the addiction or until such  
23 time as he ceases to be an addict.

24 (c) Any addict admitted for treatment under this sec-  
25 tion shall not thereby forfeit or abridge any of his rights as a

1 citizen of the United States; nor shall such admission or  
2 treatment be used against him in any proceeding in any  
3 court; and the record of his voluntary commitment shall be  
4 confidential and shall not be divulged.

5  
6 PENALTIES

6 SEC. 345. (a) Any person not authorized by law or by  
7 the Surgeon General who introduces or attempts to intro-  
8 duce into or upon the grounds of any hospital of the Service  
9 at which addicts are treated and cared for, any habit-  
10 forming narcotic drug, weapon, or any other contraband  
11 article or thing, or any contraband letter or message intended  
12 to be received by an inmate thereof, shall be guilty of a felony  
13 and, upon conviction thereof, shall be punished by imprison-  
14 ment for not more than ten years.

15 (b) It shall be unlawful for any person properly com-  
16 mitted thereto to escape or attempt to escape from a hos-  
17 pital of the Service at which addicts are treated and cared  
18 for, and any such person upon apprehension and conviction  
19 in a United States court shall be punished by imprisonment  
20 for not more than five years, such sentence to begin upon  
21 the expiration of the sentence for which such person was  
22 originally confined.

23 (c) Any person who procures the escape of any person  
24 admitted to a hospital of the Service at which addicts are  
25 treated and cared for, or who advises, connives at, aids, or

1 assists in such escape, or who conceals any such inmate  
 2 after such escape, shall be punished upon conviction in a  
 3 United States court by imprisonment in the penitentiary  
 4 for not more than three years.

## 5 PART F—BIOLOGICAL PRODUCTS

### 6 REGULATION OF BIOLOGICAL PRODUCTS

7 SEC. 351. (a) No person shall sell, barter, or exchange,  
 8 or offer for sale, barter, or exchange in the District of Colum-  
 9 bia, or send, carry, or bring for sale, barter, or exchange  
 10 from any State or possession into any other State or pos-  
 11 session or into any foreign country, or from any foreign  
 12 country into any State or possession, any virus, therapeutic  
 13 serum, toxin, antitoxin, or analogous product, or arsphen-  
 14 mine or its derivatives (or any other trivalent organic arsenic  
 15 compound), applicable to the prevention, treatment, or cure  
 16 of diseases or injuries of man, unless (1) such virus, serum,  
 17 toxin, antitoxin, or other product has been propagated or  
 18 manufactured and prepared at an establishment holding an  
 19 unsuspended and unrevoked license, issued by the Adminis-  
 20 trator as hereinafter authorized, to propagate or manufacture,  
 21 and prepare such virus, serum, toxin, antitoxin, or other  
 22 product for sale in the District of Columbia, or for sending,  
 23 bringing, or carrying from place to place aforesaid; and (2)  
 24 each package of such virus, serum, toxin, antitoxin, or other  
 25 product is plainly marked with the proper name of the article



1 contained therein, the name, address, and license number of  
2 the manufacturer, and the date beyond which the contents  
3 cannot be expected beyond reasonable doubt to yield their  
4 specific results. The suspension or revocation of any license  
5 shall not prevent the sale, barter, or exchange of any virus,  
6 serum, toxin, antitoxin, or other product aforesaid which has  
7 been sold and delivered by the licensee prior to such sus-  
8 pension or revocation, unless the owner or custodian of such  
9 virus, serum, toxin, antitoxin, or other product aforesaid has  
10 been notified by the Administrator not to sell, barter, or  
11 exchange the same.

12 (b) No person shall falsely label or mark any package  
13 or container of any virus, serum, toxin, antitoxin, or other  
14 product aforesaid; nor alter any label or mark on any pack-  
15 age or container of any virus, serum, toxin, antitoxin, or other  
16 product aforesaid so as to falsify such label or mark.

17 (c) Any officer, agent, or employee of the Federal Secu-  
18 rity Agency, authorized by the Administrator for the purpose,  
19 may during all reasonable hours enter and inspect any estab-  
20 lishment for the propagation or manufacture and preparation  
21 of any virus, serum, toxin, antitoxin, or other product afore-  
22 said for sale, barter, or exchange in the District of Columbia,  
23 or to be sent, carried, or brought from any State or possession  
24 into any other State or possession or into any foreign country,  
25 or from any foreign country into any State or possession.

1       (d) Licenses for the maintenance of establishments for  
2 the propagation or manufacture and preparation of products  
3 described in subsection (a) of this section may be issued only  
4 upon a showing that the establishment and the products for  
5 which a license is desired meet standards, designed to insure  
6 the continued safety, purity, potency and efficaciousness of  
7 such products, prescribed in regulations made jointly by the  
8 Surgeon General, the Surgeon General of the Army, and the  
9 Surgeon General of the Navy, and approved by the Adminis-  
10 trator, and licenses for new products may be issued only upon  
11 a showing that they meet such standards. All such licenses  
12 shall be issued, suspended, and revoked as prescribed by regu-  
13 lations and all licenses issued for the maintenance of estab-  
14 lishments for the propagation or manufacture and prepara-  
15 tion, in any foreign country, of any such products for sale,  
16 barter, or exchange in any State or possession shall be issued  
17 upon condition that the licensees will permit the inspection  
18 of their establishments in accordance with subsection (c)  
19 of this section.

20       (e) No person shall interfere with any officer, agent,  
21 or employee of the Service in the performance of any duty  
22 imposed upon him by this section or by regulations made  
23 by authority thereof.

24       (f) Any person who shall violate, or aid or abet in  
25 violating, any of the provisions of this section shall be pun-

1   ished upon conviction by a fine not exceeding \$500 or by  
2   imprisonment not exceeding one year, or by both such fine  
3   and imprisonment, in the discretion of the court.

4       (g) The persons and the products to which this section  
5   is applicable shall be subject also to the provisions of the  
6   Federal Food, Drug, and Cosmetic Act, except that sec-  
7   tion 505 of such Act shall not apply in the case of any virus,  
8   serum, toxin, antitoxin, or other product propagated, manu-  
9   factured, or prepared pursuant to an unsuspended and un-  
10  revoked license issued under this section.

11               PREPARATION OF BIOLOGICAL PRODUCTS

12       SEC. 352. (a) The Service may prepare for its own use  
13   any product described in section 351 and any product neces-  
14   sary to carrying out any of the purposes of section 301.

15       (b) The Service may prepare any product described in  
16   section 351 for the use of other Federal departments or  
17   agencies, and public or private agencies and individuals  
18   engaged in work in the field of medicine when such product  
19   is not available from establishments licensed under such  
20   section.

21               PART G—QUARANTINE AND INSPECTION

22               CONTROL OF COMMUNICABLE DISEASES

23       SEC. 361. (a) The Surgeon General, with the approval  
24   of the Administrator, is authorized to make and enforce such  
25   regulations as in his judgment are necessary to prevent the



1 introduction, transmission, or spread of communicable diseases  
2 from foreign countries into the States or possessions, or from  
3 one State or possession into any other State or possession.  
4 For purposes of carrying out and enforcing such regulations,  
5 the Surgeon General may provide for such inspection, fumi-  
6 gation, disinfection, sanitation, pest extermination, destruction  
7 of animals or articles found to be so infected or contaminated  
8 as to be sources of dangerous infection to human beings, and  
9 other measures, as in his judgment may be necessary.

10 (b) Regulations prescribed under this section shall not  
11 provide for the apprehension, detention, or conditional re-  
12 lease of individuals except for the purpose of preventing the  
13 introduction, transmission, or spread of such communicable  
14 diseases as may be specified from time to time in Executive  
15 orders of the President upon the recommendation of the Na-  
16 tional Advisory Health Council and the Surgeon General.

17 (c) Except as provided in subsection (d), regulations  
18 prescribed under this section, insofar as they provide for  
19 the apprehension, detention, examination, or conditional re-  
20 lease of individuals, shall be applicable only to individuals  
21 coming into a State or possession from a foreign country, the  
22 Territory of Hawaii, or a possession.

23 (d) On recommendation of the National Advisory  
24 Health Council, regulations prescribed under this section may  
25 provide for the apprehension and examination of any indi-

1 vidual reasonably believed to be infected with a communi-  
2 cable disease in a communicable stage and (1) to be mov-  
3 ing or about to move from a State to another State; or (2)  
4 to be a probable source of infection to individuals who, while  
5 infected with such disease in a communicable stage, will be  
6 moving from a State to another State. Such regulations may  
7 provide that if upon examination any such individual is  
8 found to be infected, he may be detained for such time and  
9 in such manner as may be reasonably necessary.

10 SUSPENSION OF ENTRIES AND IMPORTS FROM DESIGNATED  
11 PLACES

12 SEC. 362. Whenever the Surgeon General determines  
13 that by reason of the existence of any communicable disease  
14 in a foreign country there is serious danger of the introduction  
15 of such disease into the United States, and that this danger  
16 is so increased by the introduction of persons or property from  
17 such country that a suspension of the right to introduce such  
18 persons and property is required in the interest of the public  
19 health, the Surgeon General, in accordance with regulations  
20 approved by the President, shall have the power to prohibit,  
21 in whole or in part, the introduction of persons and property  
22 from such countries or places as he shall designate in order to  
23 avert such danger, and for such period of time as he may  
24 deem necessary for such purpose.

## SPECIAL POWERS IN TIME OF WAR

SEC. 363. To protect the military and naval forces and war workers of the United States, in time of war, against any communicable disease specified in Executive orders as provided in subsection (b) of section 361, the Surgeon General, on recommendation of the National Advisory Health Council, is authorized to provide by regulations for the apprehension and examination, in time of war, of any individual reasonably believed (1) to be infected with such disease in a communicable stage and (2) to be a probable source of infection to members of the armed forces of the United States or to individuals engaged in the production or transportation of arms, munitions, ships, food, clothing, or other supplies for the armed forces. Such regulations may provide that if upon examination any such individual is found to be so infected, he may be detained for such time and in such manner as may be reasonably necessary.

## QUARANTINE STATIONS

SEC. 364. (a) Except as provided in title II of the Act of June 15, 1917, as amended (U. S. C., 1940 edition, title 50, secs. 191-194), the Surgeon General shall control, direct, and manage all United States quarantine stations, grounds, and anchorages, designate their boundaries, and designate the quarantine officers to be in charge thereof. With the approval of the President



1 he shall from time to time select suitable sites for and estab-  
2 lish such additional stations, grounds, and anchorages in  
3 the States and possessions of the United States as in his  
4 judgment are necessary to prevent the introduction of com-  
5 municable diseases into the States and possessions of the  
6 United States.

7 (b) The Surgeon General shall establish the hours dur-  
8 ing which quarantine service shall be performed at each  
9 quarantine station, and, upon application by any interested  
10 party, may establish quarantine inspection during the twenty-  
11 four hours of the day, or any fraction thereof, at such quar-  
12 antine stations as, in his opinion, require such extended serv-  
13 ice. He may restrict the performance of quarantine inspec-  
14 tion to hours of daylight for such arriving vessels as cannot,  
15 in his opinion, be satisfactorily inspected during hours of  
16 darkness. No vessel shall be required to undergo quarantine  
17 inspection during the hours of darkness, unless the quarantine  
18 officer at such quarantine station shall deem an immediate  
19 inspection necessary to protect the public health. Uniformity  
20 shall not be required in the hours during which quarantine  
21 inspection may be obtained at the various ports of the United  
22 States.

23 CERTAIN DUTIES OF CONSULAR AND OTHER OFFICERS

24 SEC. 365. (a) Any consular or medical officer of the  
25 United States, designated for such purpose by the Adminis-

1 trator, shall make reports to the Surgeon General, on such  
2 forms and at such intervals as the Surgeon General may  
3 prescribe, of the health conditions at the port or place at  
4 which such officer is stationed.

5 (b) It shall be the duty of the customs officers and of  
6 Coast Guard officers to aid in the enforcement of quarantine  
7 rules and regulations; but no additional compensation, except  
8 actual and necessary traveling expenses, shall be allowed any  
9 such officer by reason of such services.

10 BILLS OF HEALTH

11 SEC. 366. (a) Any vessel at any foreign port or place  
12 clearing or departing for any port or place in a State or  
13 possession shall be required to obtain from the consular officer  
14 of the United States or from the Public Health Service officer,  
15 or other medical officer of the United States designated by  
16 the Surgeon General, at the port or place of departure, a bill  
17 of health in duplicate, in the form prescribed by the Surgeon  
18 General. The President, from time to time, shall specify  
19 the ports at which a medical officer shall be stationed for  
20 this purpose. Such bill of health shall set forth the sanitary  
21 history and condition of said vessel, and shall state that it  
22 has in all respects complied with the regulations prescribed  
23 pursuant to subsection (c). Before granting such duplicate  
24 bill of health, such consular or medical officer shall be satis-  
25 fied that the matters and things therein stated are true.

1 The consular officer shall be entitled to demand and receive  
2 the fees for bills of health and such fees shall be established  
3 by regulation.

4 (b) Original bills of health shall be delivered to the  
5 collectors of customs at the port of entry. Duplicate copies  
6 of such bills of health shall be delivered at the time of  
7 inspection to quarantine officers at such port. The bills of  
8 health herein prescribed shall be considered as part of the  
9 ship's papers, and when duly certified to by the proper con-  
10 sular or other officer of the United States, over his official  
11 signature and seal, shall be accepted as evidence of the  
12 statements therein contained in any court of the United  
13 States.

14 (c) The Surgeon General shall from time to time pre-  
15 scribe regulations, applicable to vessels referred to in sub-  
16 section (a) of this section for the purpose of preventing the  
17 introduction into the States or possessions of the United  
18 States of any communicable disease by securing the best  
19 sanitary condition of such vessels, their cargoes, passengers,  
20 and crews. Such regulations shall be observed by such  
21 vessels prior to departure, during the course of the voyage,  
22 and also during inspection, disinfection, or other quarantine  
23 procedure upon arrival at any United States quarantine  
24 station.

25 (d) The provisions of subsections (a) and (b) of this



1 section shall not apply to vessels plying between such foreign  
2 ports on or near the frontiers of the United States and ports  
3 of the United States as are designated by treaty or may be  
4 designated by regulation; nor, to the extent prescribed by  
5 regulations, to such of the other vessels referred to in sub-  
6 section (a) hereof as may be designated in such regulations.

7 (e) It shall be unlawful for any vessel to enter any port  
8 in any State or possession of the United States to discharge  
9 its cargo, or land its passengers, except upon a certificate  
10 of the quarantine officer that regulations prescribed under  
11 subsection (c) have in all respects been complied with by  
12 such officer, the vessel, and its master. The master of every  
13 such vessel shall deliver such certificate to the collector of  
14 customs at the port of entry, together with the original bill  
15 of health and other papers of the vessel.

#### 16 CIVIL AIR NAVIGATION AND CIVIL AIRCRAFT

17 SEC. 367. The Surgeon General is authorized to pro-  
18 vide by regulations for the application to civil air navigation  
19 and civil aircraft of any of the provisions of sections 364,  
20 365, and 366 and regulations prescribed thereunder (includ-  
21 ing penalties and forfeitures for violations of such sections and  
22 regulations), to such extent and upon such conditions as  
23 he deems necessary for the safeguarding of the public health.

#### 24 PENALTIES

25 SEC. 368. (a) Any person who violates any regula-

1 tion prescribed under section 361, 362, or 363, or any  
2 provision of section 366 or any regulation prescribed there-  
3 under, or who enters or departs from the limits of any quar-  
4 antine station, ground, or anchorage in disregard of quaran-  
5 tine rules and regulations or without permission of the  
6 quarantine officer in charge, shall be punished by a fine of  
7 not more than \$1,000 or by imprisonment for not more than  
8 one year, or both.

9 (b) Any vessel which violates section 364 or section  
10 366, or any regulations thereunder, or under section 367,  
11 or which enters within or departs from the limits of any  
12 quarantine station, ground, or anchorage in disregard of  
13 the quarantine rules and regulations or without permission  
14 of the officer in charge, shall forfeit to the United States  
15 not more than \$5,000, the amount to be determined by  
16 the court, which shall be a lien on such vessel, to be recov-  
17 ered by proceedings in the proper district court of the United  
18 States. In all such proceedings the United States district  
19 attorney shall appear on behalf of the United States; and all  
20 such proceedings shall be conducted in accordance with the  
21 rules and laws governing cases of seizure of vessels for vio-  
22 lation of the revenue laws of the United States.

23 (c) With the approval of the Administrator, the Surgeon  
24 General may, upon application therefor, remit or mitigate any  
25 forfeiture provided for under subsection (b) of this section,

1 and he shall have authority to ascertain the facts upon all  
2 such applications.

3 ADMINISTRATION OF OATHS

4 SEC. 369. Medical officers of the United States, when  
5 performing duties as quarantine officers at any port or place  
6 within the United States, are authorized to take declarations  
7 and administer oaths in matters pertaining to the administra-  
8 tion of the quarantine laws and regulations of the United  
9 States.

10 TITLE IV—NATIONAL CANCER INSTITUTE

11 TO BE A DIVISION IN NATIONAL INSTITUTE OF HEALTH

12 SEC. 401. The National Cancer Institute shall be a  
13 division in the National Institute of Health.

14 CANCER RESEARCH, AND SO FORTH

15 SEC. 402. In carrying out the purposes of section 301  
16 with respect to cancer the Surgeon General, through the  
17 National Cancer Institute and in cooperation with the Na-  
18 tional Cancer Advisory Council, shall—

19 (a) conduct, assist, and foster researches, investi-  
20 gations, experiments, and studies relating to the cause,  
21 prevention, and methods of diagnosis and treatment of  
22 cancer;

23 (b) promote the coordination of researches con-  
24 ducted by the Institute and similar researches conducted  
25 by other agencies, organizations, and individuals;



1 (c) provide training and instruction in technical  
2 matters relating to the diagnosis and treatment of cancer;

3 (d) provide fellowships in the Institute from funds  
4 appropriated or donated for such purpose;

5 (e) secure for the Institute consultation services and  
6 advice of cancer experts from the United States and  
7 abroad;

8 (f) cooperate with State health agencies in the  
9 prevention, control, and eradication of cancer;

10 (g) procure, use, and lend radium as provided in  
11 section 403.

12 ADMINISTRATION

13 SEC. 403. (a) In carrying out the provisions of section  
14 402 all appropriate provisions of section 301 shall be ap-  
15 plicable to the authority of the Surgeon General, and he is  
16 authorized—

17 (1) to purchase radium, from time to time, without  
18 regard to section 3709 of the Revised Statutes, to make  
19 such radium available for the purposes of this title, both  
20 to the Service and by loan to other agencies and institu-  
21 tions for such consideration and subject to such condi-  
22 tions as he may prescribe;

23 (2) to provide the necessary facilities where train-  
24 ing and instruction may be given in all technical matters  
25 relating to diagnosis and treatment of cancer to persons

1 found by the Surgeon General to have proper technical  
2 qualifications, and designated by him for such training  
3 or instruction, and to fix and pay them a per diem allow-  
4 ance during such training or instruction of not to exceed  
5 \$10.

6 (b) The Surgeon General shall recommend acceptance  
7 of conditional gifts pursuant to section 501 of this Act, for  
8 study, investigation, or research into the cause, prevention,  
9 and methods of diagnosis and treatment of cancer, or for the  
10 acquisition of grounds or for the erection, equipment, or main-  
11 tenance of premises, buildings, or equipment of the Institute,  
12 only after consultation with the National Cancer Advisory  
13 Council. Donations of \$50,000 or over in aid of research  
14 under this title may be acknowledged by the establishment  
15 within the Institute of suitable memorials to the donors.

16 (c) In carrying out the purposes of section 402 grants-  
17 in-aid for cancer projects shall be made only after review and  
18 recommendation of the National Cancer Advisory Council  
19 made pursuant to section 404.

20 FUNCTIONS OF COUNCIL

21 SEC. 404. The council is authorized—

22 (a) to review research projects or programs sub-  
23 mitted to or initiated by it relating to the study of the  
24 cause, prevention, or methods of diagnosis and treatment  
25 of cancer, and certify approval to the Surgeon General,

1 for prosecution under section 402, of any such projects  
2 which it believes show promise of making valuable con-  
3 tributions to human knowledge with respect to the cause,  
4 prevention, or methods of diagnosis and treatment of  
5 cancer;

6 (b) to collect information as to studies which are  
7 being carried on in the United States or any other  
8 country as to the cause, prevention, and methods of  
9 diagnosis and treatment of cancer, by correspondence  
10 or by personal investigation of such studies, and with the  
11 approval of the Surgeon General make available such  
12 information through the appropriate publications for the  
13 benefit of health agencies and organizations (public or  
14 private), physicians, or any other scientists, and for  
15 the information of the general public;

16 (c) to review applications from any university,  
17 hospital, laboratory, or other institution whether public  
18 or private, or from individuals, for grants-in-aid for  
19 research projects relating to cancer, and certify to the  
20 Surgeon General its approval of grants-in-aid in the  
21 cases of such projects which show promise of making  
22 valuable contributions to human knowledge with respect  
23 to the cause, prevention, or methods of diagnosis or  
24 treatment of cancer;

25 (d) to recommend to the Surgeon General for



1 acceptance conditional gifts pursuant to section 501 of  
2 this Act; and

3 (e) to make recommendations to the Surgeon Gen-  
4 eral with respect to carrying out the provisions of this  
5 title.

#### 6 APPROPRIATIONS

7 SEC. 405. Appropriations to carry out the purposes of  
8 this title shall be available for the acquisition of land or the  
9 erection of buildings only if so specified, but in the absence  
10 of express limitation therein may be expended in the Dis-  
11 trict of Columbia for personal services, stenographic recording  
12 and translating services, by contract if deemed necessary,  
13 without regard to section 3709 of the Revised Statutes;  
14 traveling expenses (including the expenses of attendance at  
15 meetings when specifically authorized by the Surgeon Gen-  
16 eral) ; rental, supplies and equipment, purchase and exchange  
17 of medical books, books of reference, directories, periodicals,  
18 newspapers, and press clippings; purchase, operation, and  
19 maintenance of motor-propelled passenger-carrying vehicles;  
20 printing and binding (in addition to that otherwise provided  
21 by law) ; and for all other necessary expenses in carrying out  
22 the provisions of this title.

#### 23 OTHER WORK WITH RESPECT TO CANCER

24 SEC. 406. This title shall not be construed as limiting  
25 (1) the functions or authority of the Surgeon General or the

1 Public Health Service under any other title of this Act, or  
2 of any other officer or agency of the United States, relating  
3 to the study of the prevention, diagnosis, and treatment of  
4 cancer; or (2) the expenditure of money therefor.

## 5 TITLE V—MISCELLANEOUS

### 6 GIFTS

7 SEC. 501. (a) The Administrator is authorized to ac-  
8 cept on behalf of the United States gifts made uncondi-  
9 tionally by will or otherwise for the benefit of the  
10 Service or for the carrying out of any of its functions. Con-  
11 ditional gifts may be so accepted if recommended by the  
12 Surgeon General, and the principal of and income from any  
13 such conditional gift shall be held, invested, reinvested, and  
14 used in accordance with its conditions, but no gift shall be  
15 accepted which is conditioned upon any expenditure not to be  
16 met therefrom or from the income thereof unless such expen-  
17 diture has been approved by Act of Congress.

18 (b) Any unconditional gift of money accepted pursuant  
19 to the authority granted in subsection (a) of this section, the  
20 net proceeds from the liquidation (pursuant to subsection (c)  
21 or subsection (d) of this section) of any other property so  
22 accepted, and the proceeds of insurance on any such gift prop-  
23 erty not used for its restoration, shall be deposited in the  
24 Treasury of the United States and are hereby appropriated  
25 and shall be held in trust by the Secretary of the Treasury for

1 the benefit of the Service, and he may invest and reinvest  
2 such funds in interest-bearing obligations of the United States  
3 or in obligations guaranteed as to both principal and interest  
4 by the United States. Such gifts and the income from such  
5 investments shall be available for expenditure in the operation  
6 of the Service and the performance of its functions, subject  
7 to the same examination and audit as is provided for appro-  
8 priations made for the Service by Congress.

9 (c) The evidences of any unconditional gift of in-  
10 tangible personal property, other than money, accepted  
11 pursuant to the authority granted in subsection (a) of this  
12 section shall be deposited with the Secretary of the Treasury  
13 and he, in his discretion, may hold them, or liquidate them  
14 except that they shall be liquidated upon the request of the  
15 Administrator, whenever necessary to meet payments re-  
16 quired in the operation of the Service or the performance of  
17 its functions. The proceeds and income from any such  
18 property held by the Secretary of the Treasury shall be  
19 available for expenditure as is provided in subsection (b)  
20 of this section.

21 (d) The Administrator shall hold any real property or  
22 any tangible personal property accepted unconditionally pur-  
23 suant to the authority granted in subsection (a) of this sec-  
24 tion and he shall permit such property to be used for the  
25 operation of the Service and the performance of its functions



1 or he may lease or hire such property, and may insure such  
2 property, and deposit the income thereof with the Secretary  
3 of the Treasury to be available for expenditure as provided in  
4 subsection (b) of this section: *Provided*, That the income  
5 from any such real property or tangible personal property  
6 shall be available for expenditure in the discretion of the  
7 Administrator for the maintenance, preservation, or repair  
8 and insurance of such property and that any proceeds from  
9 insurance may be used to restore the property insured. Any  
10 such property when not required for the operation of the  
11 Service or the performance of its functions may be liquidated  
12 by the Administrator, and the proceeds thereof deposited  
13 with the Secretary of the Treasury, whenever in his judgment  
14 the purposes of the gifts will be served thereby.

15 USE OF IMMIGRATION STATION HOSPITALS

16 SEC. 502. The Immigration and Naturalization Service  
17 may, by agreement of the heads of the departments con-  
18 cerned, permit the Public Health Service to use hospitals at  
19 immigration stations for the care of Public Health Service  
20 patients. The Surgeon General shall reimburse the Immi-  
21 gration and Naturalization Service for the actual cost of  
22 furnishing fuel, light, water, telephone, and similar supplies  
23 and services, which reimbursement shall be covered into  
24 the proper Immigration and Naturalization Service appro-

1 priation, or such costs may be paid from working funds  
2 established as provided by law, but no charge shall be  
3 made for the expense of physical upkeep of the hospitals.  
4 The Immigration and Naturalization Service shall reim-  
5 burse the Surgeon General for the care and treatment of  
6 persons detained in hospitals of the Public Health Service  
7 at the request of the Immigration and Naturalization Service  
8 unless such persons are entitled to care and treatment under  
9 section 322 (a).

10 MONEY COLLECTED FOR CARE OF PATIENTS

11 SEC. 503. Money collected as provided by law for ex-  
12 penses incurred in the care and treatment of foreign seamen,  
13 and money received for the care and treatment of pay pa-  
14 tients, including any amounts received from any executive  
15 department on account of care and treatment of pay patients,  
16 shall be covered into the appropriation from which the  
17 expenses of such care and treatment were paid.

18 CARE OF PUBLIC HEALTH SERVICE PATIENTS AT SAINT

19 ELIZABETHS HOSPITAL

20 SEC. 504. Insane patients entitled to treatment by the  
21 Service shall be admitted, upon order of the Administrator,  
22 into Saint Elizabeths Hospital or, upon order of the Surgeon  
23 General, into any hospital, institution, or station of the Serv-  
24 ice especially equipped for the accommodation of such pa-

1 tients and shall be cared for and treated therein until cured  
2 or until ordered removed by the officer authorizing such  
3 admittance.

#### 4 SETTLEMENT OF CLAIMS

5 SEC. 505. The Administrator may consider, ascertain,  
6 adjust, and determine any claim which shall accrue, on ac-  
7 count of damages occasioned by collisions or incident to the  
8 operation of vessels of the Service, and for which damages  
9 such vessels are found by him to be responsible. To be con-  
10 sidered for settlement under this section, claims must be  
11 presented to the Administrator within one year of their  
12 accrual. The amount ascertained and determined to be due  
13 any claimant, not exceeding \$3,000 in any one case, shall be  
14 certified to Congress as a legal claim for payment out of  
15 appropriations that may be made therefor by Congress, to-  
16 gether with a brief statement of the character of each claim,  
17 the amount claimed, and the amount allowed. Acceptance  
18 by any claimant of the amount determined to be due under  
19 this section shall be deemed to be in full and final settlement  
20 of such claim against the Government of the United States.

#### 21 - TRANSPORTATION OF REMAINS OF OFFICERS

22 SEC. 506. Appropriations available for traveling ex-  
23 penses of the Service shall be available for meeting the cost of  
24 preparation for burial and of transportation to the place of



1 burial of remains of commissioned officers, and of personnel  
2 specified in regulations, who die in line of duty.

3 SETTLEMENT OF ACCOUNTS OF DECEASED OFFICERS

4 SEC. 507. (a) In the settlement of the accounts of de-  
5 ceased commissioned officers where the amount due the de-  
6 cedent's estate is less than \$1,000 and no demand is presented  
7 by a duly appointed representative of the estate, the account-  
8 ing officers may allow the amount found due to the decedent's  
9 widow or legal heirs in the following order of precedence:  
10 First, to the widow; second, if the decedent left no widow,  
11 or the widow be dead at time of settlement, then to the chil-  
12 dren or their issue, per stirpes; third, if no widow or children  
13 or their issue, then to the father and mother in equal parts,  
14 provided the father has not abandoned the support of his  
15 family, in which case to the mother alone; fourth, if either  
16 the father or mother be dead, then to the one surviving;  
17 fifth, if there be no widow, child, father, or mother at the  
18 date of settlement, then to the brothers and sisters and chil-  
19 dren of deceased brothers and sisters, per stirpes.

20 (b) Subsection (a) shall not be construed so as to pre-  
21 vent payment of funeral expenses from the amount due the de-  
22 cedent's estate if a claim therefor is presented, before settle-  
23 ment by the accounting officers, by the person or persons who  
24 actually paid such expenses.

1

## TRANSFER OF FUNDS

2

SEC. 508. For the purpose of any reorganization under  
3 section 202, the Administrator, with the approval of the  
4 Director of the Bureau of the Budget, is authorized to  
5 make such transfers of funds between appropriations as may  
6 be necessary for the continuance of transferred functions.

7

## AVAILABILITY OF APPROPRIATIONS

8

SEC. 509. Appropriations for carrying out the pro-  
9 visions of section 301 shall be available for expenditure for  
10 personal services and rent at the seat of Government, for  
11 books of reference, periodicals, and exhibits, and for print-  
12 ing and binding.

13

## UNAUTHORIZED WEARING OF UNIFORMS

14

SEC. 510. Except as may be authorized by regulations  
15 of the President, the insignia and uniform of commissioned  
16 officers of the Service, or any distinctive part of such insignia  
17 or uniform, or any insignia or uniform any part of which is  
18 similar to a distinctive part thereof, shall not be worn, after  
19 the promulgation of such regulations, by any person other  
20 than a commissioned officer of the Service, and any person  
21 violating this section shall be subject to the penalties provided  
22 by the Act of June 3, 1916, as amended (U. S. C., 1940  
23 edition, title 10, sec. 1393), in the case of unlawful wearing  
24 of the uniform of commissioned officers of the Army.

## ANNUAL REPORT

1

2 SEC. 511. The Surgeon General shall transmit to the  
3 Administrator, for submission to the Congress at the be-  
4 ginning of each regular session, a full report of the admin-  
5 istration of the functions of the Service under this Act,  
6 including a detailed statement of receipts and disbursements.

7 TITLE VI—TEMPORARY AND EMERGENCY PRO-  
8 VISIONS AND AMENDMENTS AND REPEALS

9 EXISTING POSITIONS, PROCEDURES, AND SO FORTH

10 SEC. 601. (a) The provisions of this Act shall not  
11 affect the term or tenure of office or employment of the  
12 Surgeon General, or of any officer or employee of the  
13 Service, or of any member of the National Advisory Health  
14 Council or the National Advisory Cancer Council, in office  
15 or employed at the time of its enactment.

16 (b) Notwithstanding the provisions of this Act, exist-  
17 ing positions, divisions, committees, and procedures in the  
18 Service shall continue unless and until abolished, changed,  
19 or transferred pursuant to authority granted in this Act.

20 EXISTING REGULATIONS, AND SO FORTH

21 SEC. 602. Notwithstanding the provisions of this Act,  
22 existing rules, regulations of or applicable to the Service, and  
23 Executive orders, shall remain in effect until repealed, or  
24 until modified or superseded by regulations made in accord-  
25 ance with the provisions of this Act.



## 1 FUNDS, APPROPRIATIONS, AND PROPERTY

2 SEC. 603. All appropriations, allocations, and other  
3 funds, and all properties available for use by the Public  
4 Health Service or any division or unit thereof shall con-  
5 tinue to be available to the Service.

## 6 APPROPRIATIONS FOR EMERGENCY HEALTH AND

## 7 SANITATION ACTIVITIES

8 SEC. 604. For each fiscal year during the continuance of  
9 the present war and during any period of demobilization after  
10 the war, there is hereby authorized to be appropriated such  
11 sum as may be necessary to enable the Surgeon General,  
12 either directly or through State health authorities, to conduct  
13 health and sanitation activities in areas adjoining military  
14 or naval reservations within or without the United States,  
15 in areas where there are concentrations of military or naval  
16 forces, in Government and private industrial plants engaged  
17 in defense work, and in areas adjoining such industrial plants.

## 18 EMPLOYEES' COMPENSATION

19 SEC. 605. (a) Section 7 of the Act of September 7,  
20 1916, entitled "An Act to provide compensation for employ-  
21 ees of the United States suffering injuries while in the per-  
22 formance of their duties, and for other purposes", as amended  
23 (U. S. C., 1940 edition, title 5, sec. 757), is amended by  
24 changing the period at the end thereof to a colon and adding  
25 the following: "*Provided*, That whenever any person is en-

1 titled to receive any benefits under this Act by reason of his  
2 injury, or by reason of the death of an employee, as defined  
3 in section 40, and is also entitled to receive from the United  
4 States any payments or benefits (other than the proceeds of  
5 any insurance policy), by reason of such injury or death under  
6 any other Act of Congress, because of service by him (or in  
7 the case of death, by the deceased) as an employee, as so  
8 defined, such person shall elect which benefits he shall re-  
9 ceive. Such election shall be made within one year after the  
10 injury or death, or such further time as the Commission may  
11 for good cause allow, and when made shall be irrevocable  
12 unless otherwise provided by law."

13 (b) The definition of the term "employee" in section  
14 40 of such Act of September 7, 1916, as amended (U. S. C.,  
15 1940 edition, title 5, sec: 790), is amended to read as  
16 follows:

17 "The term 'employee' includes all civil employees of the  
18 United States and of the Panama Railroad Company, com-  
19 missioned officers of the Regular Corps of the Public Health  
20 Service, officers in the Reserve of the Public Health Service  
21 on active duty, and all persons, other than independent con-  
22 tractors and their employees, employed on the Menominee  
23 Indian Reservation in the State of Wisconsin, subsequent to  
24 September 7, 1916, in operations conducted pursuant to the  
25 Act entitled 'An Act to authorize the cutting of timber, the

1 manufacture and sale of lumber, and the preservation of the  
2 forests on the Menominee Indian Reservation in the State of  
3 Wisconsin,' approved March 28, 1908, as amended, or any  
4 other Act relating to tribal timber and logging operations on  
5 the Menominee Reservation."

6 (c) In the case of injury or death of a commissioned  
7 officer of the Service occurring after November 10, 1943,  
8 and on or before the date of the termination of the present  
9 war, the election required by section 7 of such Act of Sep-  
10 tember 7, 1916, as amended (U. S. C., 1940 edition, title  
11 5, sec. 757), may be made, and the notice required by  
12 section 15 thereof and the written claim required by section  
13 18 thereof may be filed, within such time as may be  
14 provided by regulations of the United States Employees'  
15 Compensation Commission, but not later than the expiration  
16 of one year following the termination of the present war.  
17 Prior to the expiration of such year any such election may  
18 be revised, and such revision shall operate retroactively  
19 to the date of death or injury, but there shall be deducted  
20 from the compensation or other benefit payable pursuant  
21 to a revised election any sum (except the proceeds of any  
22 insurance policy) theretofore paid on account of such  
23 death or injury.

24 (d) In the case of death of a commissioned officer  
25 of the Service which occurred after December 7, 1941,



1 and prior to November 11, 1943, the rights provided to  
2 surviving beneficiaries by section 10 of the Public Health  
3 Service Act of 1943 shall continue notwithstanding the  
4 repeal of that Act. Such beneficiaries, in addition to the  
5 right to receive six months' pay, shall have the same right  
6 of election and of revising elections as is provided by sub-  
7 section (c) of this section, except that in case of a revised  
8 election no deduction shall be made on account of such six  
9 months' pay.

10 COMPUTATION OF RETIRED PAY IN CERTAIN CASES

11 SEC. 606. In the case of commissioned officers of the  
12 Service appointed prior to the enactment of this Act, there  
13 shall be included, in determining retired pay pursuant to  
14 section 211 (c) (1), noncommissioned service in the Public  
15 Health Service, as well as all commissioned service.

16 ALLOWANCES FOR UNIFORMS TO CERTAIN COMMISSIONED  
17 PERSONNEL

18 SEC. 607. Each commissioned officer of the Service who  
19 was appointed to the Regular Corps or called to active duty  
20 in the Reserve Corps since December 7, 1941, and prior to  
21 the enactment of this Act, and who on or after November  
22 11, 1943, was on active duty in the grade of junior assistant,  
23 assistant, or passed assistant and was receiving the pay of the  
24 first, second, or third pay period, shall be entitled to receive  
25 an allowance of \$250 for uniforms and equipment.

1 PATIENTS OF SAINT ELIZABETHS HOSPITAL IN PUBLIC  
2 HEALTH SERVICE HOSPITALS

3 SEC. 608. Insane patients entitled to treatment in Saint  
4 Elizabeths Hospital who may heretofore or hereafter, during  
5 the continuance of the present war, or during the period of  
6 six months thereafter, have been admitted to hospitals of the  
7 Service, may continue to be cared for and treated in such  
8 hospitals notwithstanding the termination of such period.

9 ELIGIBILITY OF OSTEOPATHS TO APPOINTMENT IN THE  
10 RESERVE CORPS

11 SEC. 609. For the duration of the present war and for  
12 six months thereafter graduates of reputable osteopathic col-  
13 leges shall be eligible for appointment as reserve officers in  
14 the Service.

15 TEMPORARY PROVISIONS RESPECTING MEDICAL AND  
16 HOSPITAL BENEFITS

17 SEC. 610. (a) Subject to regulations of the President,  
18 members of the Women's Reserve of the Coast Guard, or  
19 their dependents, shall be entitled to the benefits provided  
20 by section 326 for male officers and enlisted men of the  
21 Coast Guard or their dependents: *Provided*, That the hus-  
22 bands of such members shall not be considered dependents,  
23 and the children of such members shall not be considered  
24 dependents unless their father is dead or they are in fact  
25 dependent on their mother for their chief support.

1 (b) Subject to regulations of the President, lightkeepers  
 2 and assistant lightkeepers (who during their active service  
 3 were entitled to medical relief at hospitals and other sta-  
 4 tions of the Public Health Service), and officers and crews  
 5 of vessels of the former Lighthouse Service, who have been  
 6 or who may hereafter be retired under the provisions of  
 7 section 6 of the Act of June 20, 1918, as amended (U. S. C.,  
 8 1940 edition, title 33, sec. 763), shall be entitled to medical,  
 9 surgical, and dental treatment and hospitalization by the  
 10 Public Health Service.

11 REPEAL OF EXISTING LAW

12 SEC. 611. The following statutes or parts of statutes  
 13 are hereby repealed:

14 Section 3689 in title XLI, and sections 4801, 4802,  
 15 4803, 4804, 4805, and 4806 in title LIX of the Revised  
 16 Statutes of the United States;

17 The last paragraph under the heading "Miscellaneous"  
 18 in chapter 130, 18 Statutes at Large 371, which paragraph  
 19 is the seventh beginning on page 377;

20 Chapter 156, 18 Statutes at Large 485;

21 Chapter 66, 20 Statutes at Large 37;

22 Chapter 202, 20 Statutes at Large 484;

23 Chapter 61, 21 Statutes at Large 46;

24 Section 1, and the final clause of section 2 (which reads  
 25 as follows: "and the said quarantine stations when so estab-



lished shall be conducted by the Marine Hospital Service under regulations framed in accordance with the Act of April twenty-ninth, eighteen hundred and seventy-eight"), of chapter 727, 25 Statutes at Large 355;

Chapter 19, 25 Statutes at Large 639;

Chapter 51, 26 Statutes at Large 31;

The last sentence of the paragraph headed "Office of the Supervising Surgeon General, Marine Hospital Service" in chapter 541, 26 Statutes at Large 908, which appears at page 923 and reads as follows: "And hereafter, the Supervising Surgeon General is hereby authorized to cause the detail of two surgeons and two passed assistant surgeons for duty in the Bureau, who shall each receive the pay and allowances of their respective grades in the general service.";

Chapter 114, 27 Statutes at Large 449;

The last sentence of the paragraph headed "Office of Supervising Surgeon General, Marine Hospital Service", in chapter 174, 28 Statutes at Large 162, which appears at page 179 and which reads as follows: "And hereafter the Supervising Surgeon General of the Marine Hospital Service is hereby authorized to cause the detail of an additional medical officer and one hospital steward for duty in the Bureau, who shall each receive the pay and allowances of his respective grade in the general service.";

Chapter 213, 28 Statutes at Large 229;

1 Chapter 300, 28 Statutes at Large 372;

2 The last sentence of the paragraph headed "Office of  
3 Supervising Surgeon General, Marine Hospital Service", in  
4 chapter 177, 28 Statutes at Large 764, which appears at  
5 page 780 and which reads as follows: "And hereafter the  
6 Supervising Surgeon General of the Marine Hospital Service  
7 is hereby authorized to cause the detail of two hospital at-  
8 tendants from the port of New York for duty in the labora-  
9 tory of the Bureau, and who shall each receive the pay  
10 equivalent to the compensation of a first-class hospital  
11 attendant.";

12 The proviso at the end of the paragraph headed "Office  
13 of Supervising Surgeon-General Marine-Hospital Service" in  
14 chapter 265, 29 Statutes at Large 538, which appears at  
15 page 554 and which reads as follows: "*Provided*, That the  
16 Secretary of the Treasury is hereby authorized, in his discre-  
17 tion, to grant to the medical officers of the Marine-Hospital  
18 Service commissioned by the President, without deduction  
19 of pay, leaves of absence for the same period of time and in  
20 the same manner as is now authorized to be granted to  
21 officers of the Army by the Secretary of War";

22 Chapter 349, 30 Statutes at Large 976;

23 Section 10, chapter 191, 31 Statutes at Large 77, at  
24 page 80;

1       The first paragraph of section 97 of chapter 339, 31  
2 Statutes at Large 141;

3       Chapter 836, 31 Statutes at Large 1086;

4       That portion of the third paragraph of section 84 of  
5 chapter 1369, 32 Statutes at Large 691, which appears at  
6 page 711 and which reads as follows: "and the provisions  
7 of law relating to the public health and quarantine shall  
8 apply in the case of all vessels entering a port of the United  
9 States or its aforesaid possessions from said islands, where  
10 the customs officers at the port of departure shall perform  
11 the duties required by such law of consular officers in  
12 foreign ports";

13       Chapter 1370, 32 Statutes at Large 712;

14       Chapter 1378, 32 Statutes at Large 728;

15       Chapter 1443, 33 Statutes at Large 1009;

16       The last sentence of the last paragraph under the heading  
17 "Public Health and Marine Hospital Service" in chapter  
18 1484, 33 Statutes at Large 1214, which appears at page  
19 1217 and which reads as follows: "And the Secretary of the  
20 Treasury shall, for the fiscal year nineteen hundred and seven,  
21 and annually thereafter, submit to Congress, in the regular  
22 Book of Estimates, detailed estimates of the expenses of  
23 maintaining the Public Health and Marine Hospital  
24 Service,";



1 Public Resolution Numbered 21, 33 Statutes at Large  
2 1283;

3 Chapter 3433, 34 Statutes at Large 299;

4 Section 17 of chapter 1134, 34 Statutes at Large 898,  
5 at page 903;

6 That portion of the third paragraph under the heading  
7 "Back Pay and Bounty" in chapter 200, 35 Statutes at Large  
8 373, as amended by chapter 213, 52 Statutes at Large 352,  
9 which is at page 352 of 52 Statutes at Large and which reads  
10 as follows: "and of deceased commissioned officers of the  
11 Public Health Service";

12 The proviso in the tenth paragraph under the heading  
13 "Public Health and Marine Hospital Service" in chapter  
14 285, 36 Statutes at Large 1363, which appears in the eighth  
15 paragraph on page 1394 and which reads as follows: "*Pro-*  
16 *vided*, That there may be admitted into said hospitals, for  
17 study, persons with infectious or other diseases affecting  
18 the public health, and not to exceed ten cases in any one  
19 hospital at one time", and the substantially similar pro-  
20 visions appearing under the heading "Public Health and  
21 Marine Hospital Service" or the heading "Public Health  
22 Service" in the following statutes: Chapter 355, 37 Statutes  
23 at Large 417, at page 435; chapter 3, 38 Statutes at  
24 Large 4, at page 24; chapter 209, 39 Statutes at Large  
25 262, at page 278; chapter 28, 40 Statutes at Large 459,

1 at page 468; chapter 113, 40 Statutes at Large 634, at  
2 page 644; chapter 24, 41 Statutes at Large 163, at page  
3 175;

4 Chapter 288, 37 Statutes at Large 309;

5 The proviso at the end of the last paragraph under the  
6 heading "Public Health Service" in chapter 149, 37 Statutes  
7 at Large 912, which appears at page 915 and which reads  
8 as follows: "*Provided*, That hereafter the director of the  
9 Hygienic Laboratory shall receive the pay and allowances  
10 of a senior surgeon";

11 That portion of the second paragraph under the heading  
12 "Public Health Service" in chapter 3, 38 Statutes at Large  
13 4, which appears at page 23 and which reads as follows:  
14 "at least six of the assistant surgeons provided for hereunder  
15 shall be required to have had a special training in the  
16 diagnosis of insanity and mental defect for duty in connec-  
17 tion with the examination of arriving aliens with special  
18 reference to the detection of mental defection;";

19 The proviso at the end of the twelfth paragraph under  
20 the heading "Public Health Service" in chapter 3, 38 Stat-  
21 utes at Large 4, which appears at page 24 and which reads as  
22 follows: "*Provided*, That hereafter commissioned officers and  
23 pharmacists, and those employees of the Service devoting all  
24 their time to field work, shall be entitled to hospital relief  
25 when taken sick or injured in line of duty";

1       The last clause of chapter 124, 38 Statutes at Large 387,  
2   which reads as follows: "and the said Secretary is hereby  
3   authorized to detail for duty on revenue cutters such sur-  
4   geons and other persons of the Public Health Service as he  
5   may deem necessary";

6       Section 5 of chapter 414, 39 Statutes at Large 536, at  
7   page 538;

8       Chapter 26, 39 Statutes at Large 872;

9       That portion of section 16 of chapter 29, 39 Statutes at  
10   Large 874, which appears at page 885 and which reads as  
11   follows: "who shall have had at least two years' experience  
12   in the practice of their profession since receiving the degree  
13   of doctor of medicine, and";

14       The sixth paragraph under the heading "Public Health  
15   Service" in chapter 3, 40 Statutes at Large 2, at page 6;

16       The seventh paragraph under the heading "Bureau of  
17   Mines" in chapter 27, 40 Statutes at Large 105, which is  
18   the third full paragraph appearing on page 146;

19       Chapter 37, 40 Statutes at Large 242;

20       The proviso in the fourth paragraph under the heading  
21   "Public Health Service" in chapter 113, 40 Statutes at  
22   Large 634, which appears at page 644 and which reads as  
23   follows: "*Provided*, That the pay of attendants at marine  
24   hospitals, quarantine, and immigration stations, whose pres-  
25   ent compensation is less than the rate of \$1,200 per annum,



1 may be increased to a rate not to exceed \$1,200 per  
2 annum”;

3       The proviso in the eleventh paragraph under the head-  
4 ing “Public Health Service” in chapter 113, 40 Statutes at  
5 Large 634, which appears at page 644 and which reads as  
6 follows: “*Provided*, That the Public Health Service, from  
7 and after July first, nineteen hundred and eighteen, shall  
8 pay to Saint Elizabeths Hospital the actual per capita cost of  
9 maintenance in the said hospital of patients committed by  
10 that Service”;

11       The sixtieth paragraph under the heading “Bureau of  
12 Fisheries” in chapter 113, 40 Statutes at Large 634, which  
13 is the fourth full paragraph appearing on page 694;

14       Sections 1, 3, 4, 6, and 7 of chapter XV of chapter 143,  
15 40 Statutes at Large 845, at page 886;

16       The thirteenth paragraph under the heading “General  
17 Expenses, Bureau of Chemistry” in chapter 178, 40 Statutes  
18 at Large 973, which is the second full paragraph appearing  
19 on page 992;

20       Section 2 of chapter 179, 40 Statutes at Large 1008;

21       Chapter 196, 40 Statutes at Large 1017;

22       Chapter 98, 40 Statutes at Large 1302;

23       The last paragraph under the heading “Public Health  
24 Service” in chapter 6, 41 Statutes at Large 35, which is the  
25 sixth full paragraph appearing on page 45;

1       The proviso at the end of the first paragraph under the  
 2 heading “Public Health Service” in chapter 94, 41 Statutes  
 3 at Large 503, which appears at page 507, and which reads  
 4 as follows: “*Provided*, That the Secretary of the Treasury  
 5 is authorized to make regulations governing the disposal of  
 6 articles produced by patients in the course of their curative  
 7 treatment, either by allowing the patient to retain same or  
 8 by selling the articles and depositing the money received to  
 9 the credit of the appropriation from which the materials for  
 10 making the articles were purchased”;

11       The second paragraph under the heading “Public Health  
 12 Service” in chapter 94, 41 Statutes at Large 503, which is  
 13 the seventh full paragraph appearing on page 507;

14       The last paragraph under the heading “Public Health  
 15 Service” in chapter 94, 41 Statutes at Large 503, which is  
 16 the seventh full paragraph appearing on page 508, and the  
 17 substantially similar provisions in chapter 161, 41 Statutes  
 18 at Large 1367, at page 1378;

19       The fourth paragraph under the heading “Quarantine  
 20 Stations” in chapter 235, 41 Statutes at Large 874, which is  
 21 the eighth full paragraph appearing on page 875;

22       The third paragraph under the heading “Public Health  
 23 Service” in chapter 235, 41 Statutes at Large 874, which  
 24 is the ninth full paragraph appearing on page 883;

25       Chapter 80, 41 Statutes at Large 1149;

1       The second paragraph under the heading "Public Health  
2 Service" in chapter 23, 42 Statutes at Large 29, which is  
3 the thirteenth full paragraph appearing on page 38;

4       The proviso at the end of section 4 of chapter 57, 42  
5 Statutes at Large 147, which appears at page 148, and which  
6 reads as follows: "*Provided*, That all commissioned personnel  
7 detailed or hereafter detailed from the United States Public  
8 Health Service to the Veterans' Bureau, shall hold the same  
9 rank and grade, shall receive the same pay and allowances,  
10 and shall be subject to the same rules for relative rank and  
11 promotion as now or hereafter may be provided by law for  
12 commissioned personnel of the same rank or grade or per-  
13 forming the same or similar duties in the United States Pub-  
14 lic Health Service";

15       The ninth paragraph under the heading "Bureau of  
16 Mines", in chapter 199, 42 Statutes at Large 552, which is  
17 the fourth full paragraph on page 588, and the substantially  
18 similar provisions in chapter 42, 42 Statutes at Large 1174,  
19 at page 1210; chapter 264, 43 Statutes at Large 390, at  
20 page 422; chapter 462, 43 Statutes at Large 1141, at page  
21 1175;

22       The last sentence of the paragraph under the heading  
23 "Public Health Service" in chapter 258, 42 Statutes at Large  
24 767, which appears at page 776 and which reads as follows:  
25 "The Immigration Service shall reimburse the Public Health



1 Service on the basis of per capita rates fixed by the Secre-  
2 tary of the Treasury and the sums received by the Public  
3 Health Service from this source shall be covered into the  
4 Treasury as miscellaneous receipts”;

5       The first proviso at the end of the ninth paragraph under  
6 the heading “Public Health Service” in chapter 84, 43  
7 Statutes at Large 64, which appears at page 75 and which  
8 reads as follows: “*Provided*, That the Immigration Service  
9 shall permit the Public Health Service to use the hospitals  
10 at Ellis Island Immigration Station for the care of the  
11 Public Health Service patients, free of expense for physi-  
12 cal upkeep, but with a charge of actual cost for fuel, light,  
13 water, telephone, and similar supplies and services, to be  
14 covered into the proper Immigration Service appropria-  
15 tions; and moneys collected by the Immigration Service  
16 on account of hospital expenses of persons detained under  
17 the immigration laws and regulations at Ellis Island Immi-  
18 gration Station shall be covered into the Treasury as  
19 miscellaneous receipts.”,

20 and substantially similar provisions under the heading “Public  
21 Health Service” in chapter 87, 43 Statutes at Large 763,  
22 at page 775; chapter 43, 44 Statutes at Large 136, at  
23 page 147; chapter 126, 45 Statutes at Large 162, at page  
24 174; chapter 39, 45 Statutes at Large 1028, at page 1039;  
25 chapter 289, 46 Statutes at Large 335, at page 347; chapter

1 110, 49 Statutes at Large 218, at page 229; chapter 725,  
 2 49 Statutes at Large 1827, at page 1839; chapter 180, 50  
 3 Statutes at Large 137, at page 149; chapter 55, 52 Statutes  
 4 at Large 120, at page 133; chapter 428, 54 Statutes at Large  
 5 574, at page 585; chapter 269, 55 Statutes at Large 466, at  
 6 page 481; and chapter 475, 56 Statutes at Large 562, at  
 7 page 581;

8 Chapter 146, 43 Statutes at Large 809;

9 The words "and public health" in the last sentence of  
 10 section 7 (b) of chapter 344, 44 Statutes at Large 568, at  
 11 page 572;

12 The words "or public-health" wherever they appear in  
 13 the second sentence of section 11 (b) of chapter 344, 44  
 14 Statutes at Large 568, at page 574, as amended;

15 Section 3 of chapter 371, 44 Statutes at Large 622, at  
 16 page 626;

17 Chapter 625, 45 Statutes at Large 603;

18 The proviso at the end of the fifth paragraph under the  
 19 heading "Public Health Service" in chapter 39, 45 Statutes  
 20 at Large 1028, which appears at page 1039, and which reads  
 21 as follows: "*Provided*, That funds expendable for transpor-  
 22 tation and traveling expenses may also be used for prepara-  
 23 tion for shipment and transportation to their former homes  
 24 of remains of officers who die in line of duty",  
 25 and substantially similar provisions appearing under the

1 heading "Public Health Service" in chapter 289, 46 Statutes  
 2 at Large 335, at page 346; chapter 110, 49 Statutes at Large  
 3 218, at page 228; chapter 180, 50 Statutes at Large 137, at  
 4 page 148; chapter 55, 52 Statutes at Large 120, at page 132;  
 5 chapter 428, 54 Statutes at Large 574, at page 584; chap-  
 6 ter 269, 55 Statutes at Large 466, at page 480;

7 Chapter 82, 45 Statutes at Large 1085;

8 The second paragraph under the heading "Government  
 9 in the Territories" in chapter 707, 45 Statutes at Large 1623,  
 10 which is the seventh full paragraph on page 1644;

11 So much of chapter 70, 46 Statutes at Large 81, as  
 12 reads: "and at his discretion to permit the erection of other  
 13 buildings which may in the future be donated to promote  
 14 the welfare of patients and personnel";

15 Chapter 125, 46 Statutes at Large 150;

16 Chapter 320, 46 Statutes at Large 379;

17 Section 4 of chapter 488, 46 Statutes at Large 585;

18 Chapter 597, 46 Statutes at Large 807;

19 Chapter 409, 46 Statutes at Large 1491;

20 The words "or public health" in the last sentence of  
 21 section 2 of chapter 656, 48 Statutes at Large 1116;

22 The ninth paragraph under the heading "Public Health  
 23 Service" in chapter 110, 49 Statutes at Large 218, which is  
 24 the second full paragraph appearing on page 229;



1 Title VI of chapter 531, 49 Statutes at Large 620, at  
2 page 634;

3 Chapter 161, 49 Statutes at Large 1185;

4 That portion of chapter 550, 49 Statutes at Large 1514,  
5 which reads as follows: "or of the United States Public  
6 Health Service";

7 The proviso at the end of the thirteenth paragraph under  
8 the heading "Public Health Service" in chapter 725, 49  
9 Statutes at Large 1827, which appears at page 1840 and  
10 which reads as follows: "*Provided*, That on and after July 1,  
11 1936, the Narcotic Farm at Lexington, Kentucky, shall be  
12 known as United States Public Health Service Hospital,  
13 Lexington, Kentucky, but such change in designation shall  
14 not affect the status of any person in connection therewith  
15 or the status of such institution under any Act applicable  
16 thereto";

17 The fourth paragraph under the heading "Public Health  
18 Service" in chapter 180, 50 Statutes at Large 137, which is  
19 the sixth full paragraph on page 148;

20 Section 2 of chapter 545, 50 Statutes at Large 547;

21 Chapter 565, 50 Statutes at Large 559;

22 The first proviso in the paragraph having the subhead  
23 "Division of Mental Hygiene" under the heading "Public  
24 Health Service" in chapter 55, 52 Statutes at Large 120,  
25 which appears at page 134 and which reads as follows:

1 *“Provided, That on and after July 1, 1938, the United States*  
 2 *Narcotic Farm, Fort Worth, Texas, shall be known as*  
 3 *United States Public Health Service Hospital of Fort Worth,*  
 4 *Texas, but such change in designation shall not affect the*  
 5 *status of any person in connection therewith or the status*  
 6 *of such institution under any Act applicable thereto:”;*

7 Chapter 267, 52 Statutes at Large 439;

8 Chapter 92, 53 Statutes at Large 620;

9 Chapter 606, 53 Statutes at Large 1266;

10 Chapter 636, 53 Statutes at Large 1338;

11 Section 509 of chapter 666, 53 Statutes at Large 1360,  
 12 at page 1381;

13 Section 205 (b) of Reorganization Plan Numbered I,  
 14 53 Statutes at Large 1423, at page 1425;

15 Chapter 566, 54 Statutes at Large 747;

16 The fourth paragraph under the heading “Public Health  
 17 Service” in Public Law 11, Seventy-eighth Congress, at  
 18 page 4; and

19 Public Law 184, Seventy-eighth Congress.

20 PRESERVATION OF RIGHTS AND LIABILITIES

21 SEC. 612. The repeal of the several statutes or parts  
 22 of statutes accomplished by section 611 shall not affect any  
 23 act done, or any right accruing or accrued, or any suit or  
 24 proceeding had or commenced in any civil cause, before  
 25 such repeal, but all rights and liabilities under the statutes

1 or parts thereof so repealed shall continue, and may be  
2 enforced in the same manner, as if such repeal had not been  
3 made.

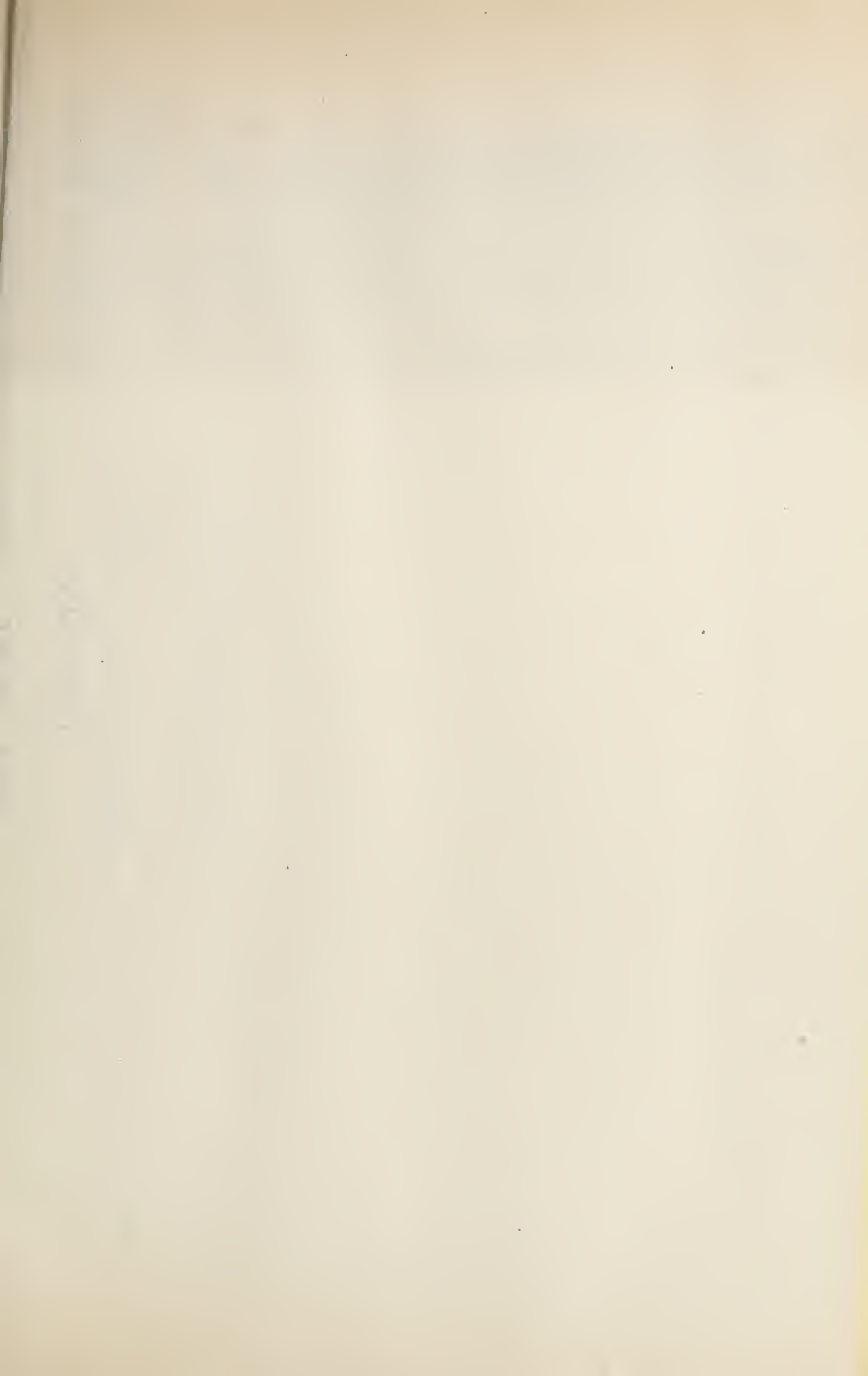
Passed the House of Representatives May 22, 1944.

Attest:

SOUTH TRIMBLE,

*Clerk.*





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## AN ACT

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To consolidate and revise the laws relating to the Public Health Service, and for other purposes.

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MAY 23 (legislative day, MAY 9), 1944

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Read twice and referred to the Committee on Commerce









United States  
of America

# Congressional Record

PROCEEDINGS AND DEBATES OF THE 78<sup>th</sup> CONGRESS, SECOND SESSION

Vol. 90

WASHINGTON, FRIDAY, JUNE 16, 1944

No. 112

## Senate

(Legislative day of Tuesday, May 9, 1944)

The Senate met at 12 o'clock meridian, on the expiration of the recess.

The Chaplain, Rev. Frederick Brown Harris, D. D., offered the following prayer:

O Thou who changest not in a world so rocked and shaken, so filled with lamentation and clamor, a world swept by the whirlwind and riven by the earthquake, we would find the peace of Thy presence and of the still small voice. In our dire need steal Thou upon our troubled spirits like the vesper calm of lingering twilight, like the gentle dew on parched ground; commission us as the servants of Thy righteous will and fit our spirits for that high role in this time on ages telling. Save us from the tragic mistakes of the past. Make us architects of a statelier temple of humanity where no child of Thine shall be kept back from the common altar of fellowship and where all kindreds are one before Thy searching eyes. As the fires of war are quenched give us the wisdom so to build that never again in blind folly will we choose foundations which are sinking sand and walls of tinder which will prove but rubble for the devouring flame. We pray in the dear Redeemer's name. Amen.

### THE JOURNAL

On request of Mr. BARKLEY, and by unanimous consent, the reading of the Journal of the proceedings of the calendar day Thursday, June 15, 1944, was dispensed with, and the Journal was approved.

### MESSAGES FROM THE PRESIDENT

Messages in writing from the President of the United States were communicated to the Senate by Mr. Miller, one of his secretaries.

### MESSAGE FROM THE HOUSE

A message from the House of Representatives, by Mr. Chaffee, one of its reading clerks, announced that the House had agreed to the report of the committee of conference on the disagreeing votes of the two Houses on the amendments of the Senate to the bill (H. R. 4183) making appropriations for the fiscal year ending June 30, 1945, for

civil functions administered by the War Department, and for other purposes; that the House receded from its disagreement to the amendments of the Senate numbered 2 and 6 to the bill and concurred therein, and that the House insisted upon its disagreement to the amendments of the Senate numbered 1, 3, 5, 7, 8, and 9 to the bill.

The message also announced that the House had passed the following bills, in which it requested the concurrence of the Senate:

H. R. 4837. An act to extend for an additional 2 years the suspension in part of the processing tax on coconut oil; and

H. R. 4967. An act making appropriations for the Military Establishment for the fiscal year ending June 30, 1945, and for other purposes.

### ENROLLED BILL SIGNED

The message further announced that the Speaker had affixed his signature to the enrolled bill (H. R. 2711) for the relief of Mrs. Mildred Maag, and it was signed by the Acting President pro tempore.

INVESTIGATION OF CONDITIONS AFFECTING THE HOG, CATTLE, POULTRY, AND DAIRY INDUSTRIES—LETTER FROM EDWARD A. O'NEAL

Mr. WHERRY. Mr. President, yesterday I inadvertently omitted from my remarks a letter I received from Mr. Edward A. O'Neal, president of the American Farm Bureau Federation. I ask unanimous consent that the letter appear following this statement and also appear in the permanent RECORD in connection with my remarks of yesterday on this subject.

The ACTING PRESIDENT pro tempore (Mr. GILLETTE). Without objection, it is so ordered.

The letter is as follows:

AMERICAN FARM BUREAU FEDERATION,  
Washington, D. C., June 9, 1944.  
HON. KENNETH S. WHERRY,  
United States Senate,  
Washington, D. C.

DEAR SENATOR WHERRY: At the meeting of the board of directors of the American Farm Bureau Federation on May 31, 1944, a seven-point program was adopted to alleviate the major difficulties which farmers and livestock producers have experienced in recent

months. This program was developed by the National Livestock Committee of the American Farm Bureau Federation. I am attaching a copy of this program.

Included in this program was the following recommendation:

"3. If it becomes necessary, request a congressional investigation of the practices of purchasers of livestock for slaughter in order to correct the many abuses which are now said to be prevalent."

Pursuant to this recommendation, I wish to respectfully urge that an investigation be instituted immediately by Congress of the manner in which packers are taking advantage of the situation in hogs, cattle, and other livestock in circumventing the spirit and purpose of floors, ceilings, and subsidies at the expense of the American farmer and the National Treasury.

Sincerely yours,

EDW. A. O'NEAL,  
President.

### NATIONAL SERVICE LIFE INSURANCE

The ACTING PRESIDENT pro tempore laid before the Senate a letter from the Administrator of Veterans' Affairs, transmitting a draft of proposed legislation to liberalize certain provisions of the National Service Life Insurance Act of 1940, as amended, which, with the accompanying paper, was referred to the Committee on Finance.

### FREE PORTS FOR EUROPEAN WAR REFUGEES

Mr. MALONEY. Mr. President, I ask unanimous consent to present for appropriate reference and to have printed in the RECORD a letter and resolution which I have received from Rabbi Abraham J. Feldman, of the Congregation Beth Israel, and Mr. Maurice Hartman, president, Hartford, Conn.

The resolution urges the establishment of "free ports," whereby temporary haven may be provided for European refugees.

There being no objection, the letter and resolution were referred to the Committee on Foreign Relations and ordered to be printed in the RECORD, as follows:

THE CONGREGATION BETH ISRAEL,  
Hartford, Conn., June 14, 1944.  
The Honorable FRANCIS MALONEY,  
The United States Senate,  
Washington, D. C.

DEAR SIR: We beg to transmit to you the enclosed resolution, which has been adopted by the Congregation Beth Israel, and we be-



speak your earnest support of the matter dealt with therein.

Cordially yours,

Rabbi ABRAHAM J. FELDMAN.  
MAURICE HARTMAN, *President*.

America was founded by refugees—by refugees fleeing from religious persecution and racial bigotry. This great Nation, conceived in liberty, has been peculiarly sensitive to the cry of its brothers' blood wherever and whenever they have been enslaved and persecuted. Particularly because of its deep religious heritage and character, believing that men are endowed by their Creator with certain inalienable rights—among these being liberty and the pursuit of happiness, and, above all, life—America has been the traditional haven of those who have been robbed of these precious possessions.

The hour has come when America must once again rise to this, her manifest destiny, when the God who led our early founding fathers to this richly dowered land is calling upon us to "bring forth the prisoner from the prison house and those that dwell in darkness from the dungeon."

We commend the President of the United States for his leadership and vision manifested in championing the cause of the afflicted, not only by words but by forthright deeds. Especially timely has been his recent creation of the War Refugee Board, which has already evidenced its sincere determination to rescue as many as possible of those victims of nazism otherwise marked out for wholesale slaughter in the plan of "free ports" advocated by the War Refugee Board, whereby temporary haven may be provided for those who would otherwise be murdered to the last man. We agree that America can do no less for these, our allies and fellow foes of nazism, than we do for our enemies who, as prisoners of war, are provided with at least such temporary sojourn and security. We appeal to the conscience of America to respond immediately to this suggestion of the War Refugee Board, and we call upon our representatives in Congress, as well as upon all our fellow citizens, to save the lives of thousands, and even hundreds of thousands, otherwise destined for mass extermination, by setting up at once such "free ports," such islands of temporary rescue, upon the free and cherished soil of America.

#### REPORTS OF COMMITTEES

The following reports of committees were submitted:

By Mr. ELLENDER, from the Committee on Claims:

S. 1983. A bill for the relief of Mrs. Anna Runnebaum; without amendment (Rept. No. 982).

By Mr. McKELLAR, from the Committee on Post Offices and Post Roads:

H. R. 3870. A bill to amend section 214 of the act of February 28, 1925; without amendment (Rept. No. 983);

H. R. 4033. A bill relating to the use of the penalty mail privilege; without amendment (Rept. No. 984);

H. R. 4517. A bill to remove restrictions on establishing post-office branches and stations; without amendment (Rept. No. 985); and

H. R. 4687. A bill relating to issuance of postal notes; without amendment (Rept. No. 986).

#### BILLS INTRODUCED

Bills were introduced, read the first time, and by unanimous consent, the second time, and referred as follows:

By Mr. LUCAS:

S. 2005. A bill for the relief of Della O'Hara; to the Committee on Claims.

By Mr. McFARLAND (for himself and Mr. HAYDEN):

S. 2006. A bill for the relief of J. A. Davis; to the Committee on Claims.

By Mr. O'DANIEL:

S. 2007. A bill for the relief of Lum Jacobs (with accompanying papers); to the Committee on Claims.

#### HOUSE BILLS REFERRED

The following bills were each read twice by their titles and referred, as indicated:

H. R. 4837. An act to extend for an additional 2 years the suspension in part of the processing tax on coconut oil; to the Committee on Finance.

H. R. 4967. An act making appropriations for the Military Establishment for the fiscal year ending June 30, 1945, and for other purposes; to the Committee on Appropriations.

#### CHANGE OF REFERENCE

Mr. THOMAS of Utah. Mr. President, House bill 4624, to consolidate and revise the laws relating to the Public Health Service, and for other purposes, came to the Senate from the House of Representatives and was referred to the Committee on Commerce. A similar bill was introduced in the Senate some months ago and was referred to the Committee on Education and Labor which has given much consideration to it. By arrangement with the chairman of the Committee on Commerce, I now ask unanimous consent that the Committee on Commerce be discharged from the further consideration of House bill 4624 and that it be referred to the Committee on Education and Labor.

The ACTING PRESIDENT pro tempore. Is there objection to the unanimous-consent request of the Senator from Utah? The Chair hears none, and the change of reference will be made.

#### INVESTIGATION OF ACTIVITIES OF POLITICAL ACTION COMMITTEE OF THE C. I. O.—AMENDMENTS

Mr. TUNNELL submitted sundry amendments intended to be proposed by him to the resolution (S. Res. 298) to investigate the activities of the Political Action Committee of the Congress of Industrial Organizations (submitted by Mr. BUTLER on May 31, 1944), which were referred to the Committee on Privileges and Elections and ordered to be printed.

#### COMPENSATION OF TEMPORARY CLERK, COMMITTEE ON PUBLIC LANDS AND SURVEYS

Mr. HATCH submitted the following resolution (S. Res. 311), which was referred to the Committee on Public Lands and Surveys:

*Resolved*, That the compensation of the assistant clerk employed by the Committee on Public Lands and Surveys under Senate Resolution 245, Seventy-seventh Congress, as continued by Senate Resolution 307, Seventy-seventh Congress, shall hereafter be at the rate of \$1,800 per annum, and \$1,500 additional so long as the position is held by the present incumbent.

#### REPORT OF THE COMMISSION OF FINE ARTS (S. DOC. NO. 204)

Mr. BARKLEY. Mr. President, on the 1st of June this year the President sent to the Congress the Fourteenth Report of the Commission of Fine Arts for the period from January 1, 1940, to June 30,

1944. Heretofore those reports have been printed as Senate or House documents, including the illustrations. It is a very valuable publication. I ask unanimous consent that the report to which I have just referred be printed as a Senate document, with illustrations.

The ACTING PRESIDENT pro tempore. Is there objection to the request of the Senator from Kentucky? The Chair hears none, and it is so ordered.

#### DEMOCRACY IN ACTION—ADDRESS BY SENATOR O'DANIEL

[Mr. O'DANIEL asked and obtained leave to have printed in the RECORD a radio address entitled "Democracy in Action," delivered by him on June 15, 1944, which appears in the Appendix.]

#### PLATFORM ISSUES: LABOR AND INDUSTRY—ARTICLE BY WENDELL WILLKIE

[Mr. HATCH asked and obtained leave to have printed in the RECORD an article entitled "Platform Issues—Labor and Industry," written by Wendell Willkie, and published in the Washington Post of June 16, 1944, which appears in the Appendix.]

#### KEEP PRICE CONTROL—EDITORIAL FROM THE NEWARK EVENING NEWS

[Mr. WALSH of New Jersey asked and obtained leave to have printed in the RECORD an editorial entitled "Keep Price Control," published in the Newark (N. J.) Evening News of June 12, 1944, which appears in the Appendix.]

#### ACTION OF WAR LABOR BOARD WITH REFERENCE TO IDAHO POTATO HANDLERS

Mr. THOMAS of Idaho. Mr. President, a recent issue of the Idaho Daily Statesman, published at Boise, Idaho, includes in its editorial a letter from Mr. E. T. Taylor, master of the State grange, commenting on the War Labor Board's action against the Idaho potato handlers. I send the editorial to the desk and ask that it be read.

The ACTING PRESIDENT pro tempore. Without objection, the editorial will be read.

The legislative clerk read as follows:

#### THE GRANGE MASTER SPEAKS LOUD

The recent War Labor Board action against Idaho potato handlers has drawn this caustic editorial comment from E. T. Taylor, State grange master, in the Idaho Granger:

"Agriculture has been put into more difficulty over farm-labor matters than any other one problem.

"The draft has hit us exceedingly hard and is crippling us now in a terrific shape. Farms are being stripped of the last boy and the answer seems to be, the boy can be replaced on the farm but not in the Army.

"So the boys are going.

"Also, right now, war industries are canvassing the farm territory, running large ads in the papers, and blasting the radio time with appeals for help in war plants at wages far beyond anything the farmer can pay. The Government is paying these exorbitant wages in cost-plus contracts, and all that is left for us to do is to work harder, work longer hours, and pay and pay and pay.

"But now comes a matter that should be brought to the attention of every grange in Idaho.

"It is the prosecution by the War Labor Board of the potato handlers of Idaho, on the charge that they paid more for help than the War Labor Board said they could pay.



78TH CONGRESS  
2D SESSION

# H. R. 4624

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## IN THE SENATE OF THE UNITED STATES

MAY 23 (legislative day, MAY 9), 1944

Read twice and referred to the Committee on Commerce

JUNE 16 (legislative day, MAY 9), 1944

The Committee on Commerce discharged, and referred to the Committee on  
Education and Labor

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## AN ACT

To consolidate and revise the laws relating to the Public Health  
Service, and for other purposes.

1      *Be it enacted by the Senate and House of Representa-*  
2      *tives of the United States of America in Congress assembled,*

### 3      TITLE I—SHORT TITLE AND DEFINITIONS

#### 4                                      SHORT TITLE

5      SECTION 1. Titles I to V, inclusive, of this Act may be  
6      cited as the "Public Health Service Act".

#### 7                                      DEFINITIONS

8      SEC. 2. When used in this Act—

9      (a) The term "Service" means the Public Health  
10     Service;

1       (b) The term "Surgeon General" means the Surgeon  
2 General of the Public Health Service;

3       (c) The term "Administrator" means the Federal Se-  
4 curity Administrator;

5       (d) The term "regulations", except when otherwise  
6 specified, means rules and regulations made by the Surgeon  
7 General with the approval of the Administrator;

8       (e) The term "executive department" means any execu-  
9 tive department, agency, or independent establishment of  
10 the United States or any corporation wholly owned by the  
11 United States;

12       (f) The term "State" means a State or the District of  
13 Columbia, Hawaii, Alaska, Puerto Rico, or the Virgin  
14 Islands, except that as used in section 361 (d) such term  
15 means a State, the District of Columbia, or Alaska;

16       (g) The term "possession" includes, among other pos-  
17 sessions, Puerto Rico and the Virgin Islands;

18       (h) The term "seamen" includes any person employed  
19 on board in the care, preservation, or navigation of any  
20 vessel, or in the service, on board, of those engaged in  
21 such care, preservation, or navigation;

22       (i) The term "vessel" includes every description of  
23 watercraft or other artificial contrivance used, or capable of  
24 being used, as a means of transportation on water, exclusive  
25 of aircraft and amphibious contrivances;

(j) The term "habit-forming narcotic drug" or "narcotic" means opium and coca leaves and the several alkaloids derived therefrom, the best known of these alkaloids being morphia, heroin, and codeine, obtained from opium, and cocaine derived from the coca plant; all compounds, salts, preparations, or other derivatives obtained either from the raw material or from the various alkaloids; Indian hemp and its various derivatives, compounds, and preparations, and peyote in its various forms; and

(k) The term "addict" means any person who habitually uses any habit-forming narcotic drug so as to endanger the public morals, health, safety, or welfare, or who is or has been so far addicted to the use of such habit-forming narcotic drugs as to have lost the power of self-control with reference to his addiction.

## TITLE II—ADMINISTRATION

### PUBLIC HEALTH SERVICE

SEC. 201. The Public Health Service in the Federal Security Agency shall be administered by the Surgeon General under the supervision and direction of the Administrator.

### ORGANIZATION

SEC. 202. The Service shall consist of (1) the Office of the Surgeon General, (2) the National Institute of Health, (3) the Bureau of Medical Services, and (4) the Bureau of State Services. The Surgeon General is authorized and di-



1 rected to assign to the Office of the Surgeon General, to  
2 the National Institute of Health, to the Bureau of Medical  
3 Services, and to the Bureau of State Services, respectively,  
4 the several functions of the Service, and to establish within  
5 them such divisions, sections, and other units as he may find  
6 necessary; and from time to time abolish, transfer, and con-  
7 solidate divisions, sections, and other units and assign their  
8 functions and personnel in such manner as he may find  
9 necessary for efficient operation of the Service. No division  
10 shall be established, abolished, or transferred, and no divisions  
11 shall be consolidated, except with the approval of the Admin-  
12 istrator. The National Institute of Health shall be adminis-  
13 tered as a part of the field service. The Surgeon General  
14 may delegate to any officer or employee of the Service such  
15 of his powers and duties under this Act, except the making  
16 of regulations, as he may deem necessary or expedient

#### 17 COMMISSIONED CORPS

18 SEC. 203. There shall be in the Service a commissioned  
19 Regular Corps and, for the purpose of securing a reserve  
20 for duty in the Service in time of national emergency, a  
21 Reserve Corps. All commissioned officers shall be citizens  
22 and shall be appointed without regard to the civil-service  
23 laws and compensated without regard to the Classification  
24 Act of 1923, as amended. Commissioned officers of the  
25 Reserve Corps shall be appointed by the President and

1 commissioned officers of the Regular Corps shall be ap-  
2 pointed by him by and with the advice and consent of the  
3 Senate. Commissioned officers of the Reserve Corps shall  
4 at all times be subject to call to active duty by the Surgeon  
5 General, including active duty for the purpose of training  
6 and active duty for the purpose of determining their fitness  
7 for appointment in the Regular Corps. All active service  
8 in the Reserve Corps, as well as service in the Regular  
9 Corps, shall be credited for the purpose of promotion in the  
10 Regular Corps.

11 SURGEON GENERAL

12 SEC. 204. The Surgeon General shall be appointed  
13 from the Regular Corps for a four-year term by the Presi-  
14 dent by and with the advice and consent of the Senate.  
15 Upon the expiration of such term the Surgeon General,  
16 unless reappointed, shall revert to the grade and number in  
17 the Regular Corps that he would have occupied had he not  
18 served as Surgeon General.

19 DEPUTY SURGEON GENERAL AND ASSISTANT SURGEONS  
20 GENERAL

21 SEC. 205. (a) The Surgeon General shall assign one  
22 commissioned officer from the Regular Corps to administer  
23 the Office of the Surgeon General, to act as Surgeon General  
24 during the absence or disability of the Surgeon General or  
25 in the event of a vacancy in that office, and to perform such

1 other duties as the Surgeon General may prescribe, and while  
2 so assigned he shall have the title of Deputy Surgeon General.

3 (b) The Surgeon General shall assign six commissioned  
4 officers from the Regular Corps to be, respectively, the  
5 Director of the National Institute of Health, the Chief of the  
6 Bureau of State Services, the Chief of the Bureau of Medical  
7 Services, the Chief Medical Officer of the United States  
8 Coast Guard, the Chief Dental Officer of the Service, and  
9 the Chief Sanitary Engineering Officer of the Service, and  
10 while so serving they shall each have the title of Assistant  
11 Surgeon General.

12 (c) The Surgeon General shall designate the Assistant  
13 Surgeon General who shall serve as Surgeon General in case  
14 of absence or disability, or vacancy in the offices, of both the  
15 Surgeon General and the Deputy Surgeon General.

16 GRADES, RANKS, AND TITLES OF THE COMMISSIONED CORPS

17 SEC. 206. (a) The Surgeon General, during the period  
18 of his appointment as such, shall be of the same grade, with  
19 the same pay and allowances, as the Surgeon General of the  
20 Army; and the Deputy Surgeon General and Assistant Sur-  
21 geons General, while assigned as such, shall have the grade  
22 corresponding with the grade of Brigadier General, with  
23 the same pay and allowances. The grades of commissioned  
24 officers of the Service shall correspond with grades of officers  
25 of the Army as follows:



(1) Officers of the director grade—colonel;

(2) Officers of the senior grade—lieutenant colonel;

(3) Officers of the full grade—major;

(4) Officers of the senior assistant grade—captain;

(5) Officers of the assistant grade—first lieutenant;

and

(6) Officers of the junior assistant grade—second lieutenant.

(b) The titles of medical officers of the foregoing grades shall be respectively (1) medical director, (2) senior surgeon, (3) surgeon, (4) senior assistant surgeon, (5) assistant surgeon, and (6) junior assistant surgeon. The President is authorized to prescribe titles, appropriate to the several grades, for commissioned officers of the Service other than medical officers. All titles of the officers of the Reserve Corps shall have the suffix “Reserve”.

#### SPECIAL TEMPORARY POSITIONS

SEC. 207. (a) When necessary for the accomplishment of important temporary work in time of war, or of emergency proclaimed by him, the President may establish special temporary positions in the Service and prescribe grades which shall be applicable to officers during periods they are assigned to such positions. While assigned to any such position an officer shall receive the pay and allowances applicable to the grade so prescribed. Not more than three such posi-

1 tions existing at any one time shall have the grade of  
2 Assistant Surgeon General. The Surgeon General shall  
3 assign commissioned officers to such positions.

4 (b) Commissioned officers and qualified technical or  
5 professional noncommissioned personnel may be assigned by  
6 the Surgeon General to be chiefs of administrative units.  
7 Such assignments shall not affect the pay of commissioned  
8 officers so assigned, except that when any commissioned  
9 officer below the grade of director is assigned to serve as  
10 chief of a division such officer during the period so assigned  
11 shall have the temporary grade and receive the pay and  
12 allowances applicable to the director grade.

13 APPOINTMENT OF PERSONNEL

14 SEC. 208. (a) (1) Except as provided in subsection  
15 (b) of this section, original appointments to the Regular  
16 Corps may be made only in the junior assistant, assistant,  
17 and senior assistant grades and original appointments to a  
18 grade above junior assistant shall be made only after passage  
19 of an examination, given in accordance with regulations of  
20 the President, in one or more of the several branches of  
21 medicine, surgery, dentistry, hygiene, sanitary engineering,  
22 pharmacy, or related scientific specialties in the field of public  
23 health.

24 (2) Original appointments to the Reserve Corps may  
25 be made to any grade up to and including the director grade

1 but only after passage of an examination given in accordance  
2 with regulations of the President. Reserve commissions shall  
3 be for a period of not more than five years and any such com-  
4 mission may be terminated by the President at any time,  
5 in his discretion.

6 (b) Whenever commissioned officers of the Service are  
7 not available for the performance of permanent duties re-  
8 quiring highly specialized training and experience in special  
9 fields related to public health, the Administrator on recom-  
10 mendation of the Surgeon General shall report that fact to  
11 the President and the President is authorized to appoint, by  
12 and with the advice and consent of the Senate, not to exceed  
13 three persons in any one fiscal year to grades in the Regular  
14 Corps of the Service above that of senior assistant, but not  
15 to a grade above that of director; and for purposes of pay and  
16 pay period any person appointed under the provisions of this  
17 section shall be considered as having had on the date of ap-  
18 pointment service equal to that of the junior officer of the  
19 grade to which appointed.

20 (c) In accordance with regulations, special consultants  
21 may be employed to assist and advise in the operations of the  
22 Service. Such consultants may be appointed without regard  
23 to the civil-service laws and their compensation may be fixed  
24 without regard to the Classification Act of 1923, as amended.

25 (d) In accordance with regulations, individual scientists,



1 other than commissioned officers of the Service, may be des-  
2 igned by the Surgeon General to receive fellowships, ap-  
3 pointed for duty with the Service without regard to the  
4 civil-service laws and compensated without regard to the  
5 Classification Act of 1923, as amended, may hold their fel-  
6 lowships under conditions prescribed therein, and may be  
7 assigned for studies or investigations either in this country  
8 or abroad during the terms of their fellowships.

9 (e) Persons who are not citizens may be employed as  
10 consultants pursuant to subsection (c) and may be appointed  
11 to fellowships pursuant to subsection (d). Unless other-  
12 wise specifically provided, any prohibition in any other Act  
13 against the employment of aliens, or against the payment  
14 of compensation to them, shall not be applicable in the case  
15 of persons employed or appointed pursuant to such subsec-  
16 tions.

17 (f) The appointment of any officer or employee of the  
18 Service made in accordance with the civil-service laws shall  
19 be made by the Administrator, and may be made effective  
20 as of the date on which such officer or employee enters upon  
21 duty.

22

#### PAY AND ALLOWANCES

23 SEC. 209. (a) Commissioned officers of the Regular  
24 Corps shall receive such pay and allowances as are or may  
25 hereafter be provided by law.

1       (b) Reserve officers shall receive the same pay and  
2 allowances when on active duty as commissioned officers of  
3 the Regular Corps, including allowances for travel and trans-  
4 portation of household goods and effects.

5       (c) In accordance with regulations of the President,  
6 commissioned officers of the Regular Corps and officers of  
7 the Reserve on active duty may make allotments from their  
8 pay and may be granted leaves of absence without any de-  
9 duction from their pay. Such officers shall also be permitted  
10 to purchase quartermaster supplies from the Army, Navy,  
11 and Marine Corps at the same price as is charged officers  
12 of the Army, Navy, and Marine Corps.

13       (d) Female commissioned officers of the Service shall  
14 receive the same pay and allowances as male officers of  
15 corresponding grades, including allowances for dependents,  
16 except that no allowance shall be paid to any female com-  
17 missioned officer on account of any dependent who is not in  
18 fact dependent upon such officer for his or her chief sup-  
19 port. For the purposes of this subsection the term "depend-  
20 ent" shall include a husband, father, mother, and unmarried  
21 children (including stepchildren and adopted children)  
22 under twenty-one years of age.

23       (e) Members of the National Advisory Health Council  
24 and members of the National Advisory Cancer Council, other  
25 than ex officio members, while attending conferences or

1 meetings of their respective Councils or while otherwise serv-  
2 ing at the request of the Surgeon General, shall be entitled  
3 to receive compensation at a rate to be fixed by the Adminis-  
4 trator, but not exceeding \$25 per diem, and shall also be  
5 entitled to receive an allowance for actual and necessary  
6 traveling and subsistence expenses while so serving away  
7 from their places of residence.

8 (f) Field employees of the Service, except those em-  
9 ployed on a per diem or fee basis, who render part-time duty  
10 and are also subject to call at any time for services not  
11 contemplated in their regular part-time employment,  
12 may be paid annual compensation for such part-time duty  
13 and, in addition, such fees for such other services as the  
14 Surgeon General may determine; but in no case shall the  
15 total paid to any such employee for any fiscal year exceed  
16 the amount of the minimum annual salary rate of the classifi-  
17 cation grade of the employee.

18 (g) Whenever any commissioned or other officer or  
19 employee of the Service is assigned for duty which the  
20 Surgeon General finds requires intimate contact with persons  
21 afflicted with leprosy, he may receive, as provided by regula-  
22 tions of the President, in addition to the pay and any allow-  
23 ances of his grade, not more than one-half the pay of  
24 such grade, and such allowances or increased allowances  
25 as may be provided for by such regulations.



1 (h) Individuals appointed under section 208 (d) shall  
2 have included in their fellowships such stipends or allowances,  
3 including travel and subsistence expenses, as the Surgeon  
4 General may deem necessary to procure qualified fellows.

5 PROMOTIONS AND SEPARATION OF COMMISSIONED OFFICERS  
6 IN THE REGULAR CORPS

7 SEC. 210. (a) Promotions of commissioned officers of  
8 the Regular Corps to any grade up to and including the direc-  
9 tor grade shall be made only after examination given in  
10 accordance with regulations of the President and shall be  
11 made according to the same length of service as is now or may  
12 hereafter be prescribed for promotion of officers of correspond-  
13 ing grades of the Medical Corps of the Army, except that—

14 (1) In time of war, or of national emergency pro-  
15 claimed by the President, any commissioned officer of the  
16 Regular Corps may be appointed to a higher temporary  
17 grade with the pay and allowances thereof without  
18 examination and without vacating his permanent  
19 appointment, and, if his service shall have been con-  
20 tinuous, without renewing his oath of office;

21 (2) For purposes of promotion, an officer whose  
22 original appointment to the Regular Corps was above  
23 the assistant grade shall be considered as having had on  
24 the date of such original appointment service equal to  
25 that of the junior officer of the grade to which he was

1 appointed, except that if his active commissioned service  
2 in the Service exceeds that of the junior officer of the  
3 grade, such service (not exceeding ten years for an  
4 officer appointed in the senior assistant grade and four-  
5 teen years for an officer appointed in the full grade)  
6 shall be credited for purposes of promotion;

7 (3) Officers commissioned in the grade of junior  
8 assistant shall be examined for promotion after not more  
9 than two years of service and if qualified shall be pro-  
10 moted to the next higher grade; and

11 (4) Commissioned officers other than medical,  
12 dental, sanitary engineering, and pharmacist officers shall  
13 be promoted in accordance with regulations of the Presi-  
14 dent.

15 (b) At the end of his first three years of service, the  
16 record of each commissioned officer in the Regular Corps  
17 originally appointed in or above the grade of senior assistant  
18 shall be reviewed in accordance with regulations of the  
19 President and if found not fully qualified for further service  
20 he shall be separated from the Service and paid six months'  
21 pay and allowances.

22 (c) When a commissioned officer in the Regular Corps  
23 is found, after examination, to be not qualified for promo-  
24 tion for reasons other than physical disability incurred in  
25 line of duty—

26 (1) If below the full grade he shall be separated

1 from the Service, and if in the assistant grade he shall  
2 be separated and paid six months' pay and allowances,  
3 and if in the senior assistant grade he shall be separated  
4 and paid one year's pay and allowances; and

5 (2) If in the full or senior grade he shall be reported  
6 as not in line of promotion, or shall be retired and paid  
7 at the rate of  $2\frac{1}{2}$  per centum for each complete year of  
8 active commissioned service in the Service, but in no  
9 case to exceed 60 per centum of his active pay at the  
10 time he is retired.

#### 11 RETIREMENT OF COMMISSIONED OFFICERS

12 SEC. 211. (a) A commissioned officer of the Regular  
13 Corps retired for disability from disease or injury incurred  
14 in line of duty, or a commissioned officer of the Reserve  
15 Corps retired for disability from disease or injury incurred  
16 in line of duty in time of war, shall be entitled, except as  
17 provided in subsection (c), to receive retired pay at the  
18 rate of 75 per centum of his active pay at the time of  
19 retirement.

20 (b) A commissioned officer shall be retired on the first  
21 day of the month following his sixty-fourth birthday. If he  
22 is an officer in the Regular Corps, he shall, except as pro-  
23 vided in subsection (c), be entitled to receive retired pay  
24 at the rate of 75 per centum of his active pay at the time of  
25 retirement.



1       (c) (1) Any commissioned officer of the Regular  
2 Corps who at the time of his original appointment was more  
3 than forty-five years of age shall upon retirement, unless  
4 retired for disability from disease or injury incurred in time  
5 of war, be entitled to retired pay only at the rate of 4 per  
6 centum of his active pay at the time of retirement for each  
7 twelve months of active commissioned service, including  
8 any such service in the Army, Navy, or Coast Guard, but  
9 in no case more than 75 per centum of such active pay.

10       (2) The retired pay of any commissioned officer who  
11 has served four years or more as Surgeon General or Deputy  
12 Surgeon General shall be based on the pay of the highest  
13 grade held by him as such Surgeon General or Deputy  
14 Surgeon General.

15       (3) The retired pay of an officer of the Regular Corps  
16 who has failed, by reason of disability incurred in line of duty,  
17 to receive a promotion to which he would otherwise have  
18 been entitled, shall be based on the pay of the grade to which,  
19 but for such disability, he would have been promoted.

20       (d) An officer retired for disability who is found to have  
21 recovered from his disability, and in time of war an officer  
22 who has been retired for age, may in accordance with regula-  
23 tions of the President be recalled to active duty.

24       (e) With the approval of the President a commissioned  
25 officer who has served four years or more as Surgeon General

1 and who has had not less than twenty-five years of active  
2 commissioned service in the Service may retire voluntarily,  
3 either at the termination of his term as Surgeon General or  
4 at any time thereafter; and his retired pay shall be at the  
5 rate of 75 per centum of the pay of the highest grade held  
6 by him as such Surgeon General.

7 (f) Commissioned officers of the Reserve Corps, while on  
8 active duty, shall be deemed to be officers of the executive  
9 branch of the Government within the meaning of section 3  
10 of the Civil Service Retirement Act, as amended (U. S. C.,  
11 1940 edition, title 5, section 693).

#### 12 MILITARY BENEFITS

13 SEC. 212. (a) For the purposes of this section—

14 (1) the term “full military benefits” means all  
15 rights, privileges, immunities, and benefits provided  
16 under any law of the United States in the case of  
17 commissioned officers of the Army (including their sur-  
18 viving beneficiaries) on account of active military  
19 service, including, but not limited to, burial payments  
20 in the event of death, six months’ pay in case of death,  
21 veterans’ compensation and pensions and other veterans’  
22 benefits, the rights provided under the Soldiers’ and  
23 Sailors’ Civil Relief Act, as amended, and under the  
24 National Service Life Insurance Act, as amended, travel

1 allowances, including per diem allowances for travel  
2 without regard to repeated travel between two or more  
3 places in the same vicinity, exemption from payment  
4 of postage on mail, exemption of certain pay  
5 from Federal income taxation, and other benefits,  
6 privileges and exceptions under the Internal Revenue  
7 laws; excluding, however, retired pay, uniform allow-  
8 ances, the right to be awarded military ribbons, medals,  
9 and decorations, and the benefits of the Mustering-out  
10 Payment Act of 1944, and excluding reemployment  
11 rights with respect to any commissioned officer of the  
12 Service except officers of the Reserve Corps called to  
13 active duty after November 11, 1943; and

14 (2) the term "limited military benefits" means  
15 full military benefits, except veterans' compensation and  
16 pensions and other veterans' benefits, and eligibility  
17 under the National Service Life Insurance Act, as  
18 amended.

19 (b) Commissioned officers of the Service (including  
20 their surviving beneficiaries) —

21 (1) shall be entitled to limited military benefits  
22 with respect to all active service in time of war;

23 (2) shall be entitled to full military benefits with  
24 respect to active service performed while detailed for  
25 duty with the Army, Navy, or Coast Guard;



(3) shall be entitled to full military benefits with respect to active service outside the continental limits of the United States, or in Alaska, in time of war;

(4) shall be entitled to full military benefits with respect to active service performed while the Service is part of the military forces of the United States pursuant to executive order of the President.

(c) The authority vested by law in the War Department, the Secretary of War, or other officers of the War Department with respect to rights, privileges, immunities, and benefits referred to in subsection (a) shall be exercised, with respect to commissioned officers of the Service, by the Surgeon General under the supervision and direction of the Administrator.

(d) The President may prescribe the conditions under which commissioned officers of the Service may be awarded military ribbons, medals, and decorations.

#### ALLOWANCES FOR UNIFORMS

SEC. 213. An allowance of \$250 for uniforms and equipment is authorized to be paid to each commissioned officer of the Service who is hereafter, in time of war, appointed to the Regular Corps or called to active duty in the Reserve Corps, or who is hereafter on active duty in either corps at the commencement of any war, if at such time the officer is in the grade of junior assistant, assistant, or senior assistant,

1 and is receiving the pay of the first, second, or third pay  
2 period; except that no officer who has received such an  
3 allowance from the Service shall at any time thereafter be  
4 entitled to any further allowance.

5 DETAIL OF PERSONNEL

6 SEC. 214. (a) The Administrator is authorized, upon  
7 the request of the head of an executive department, to de-  
8 tail officers or employees of the Service to such department  
9 for duty as agreed upon by the Administrator and the head  
10 of such department in order to cooperate in, or conduct  
11 work related to, the functions of such department or of the  
12 Service. When officers or employees are so detailed their  
13 salaries and allowances may be paid from working funds  
14 established as provided by law or may be paid by the Service  
15 from applicable appropriations and reimbursement may be  
16 made as agreed upon by the Administrator and the head of  
17 the executive department concerned. Officers detailed for  
18 duty with the Army, Navy, or Coast Guard shall be sub-  
19 ject to the laws for the government of the service to which  
20 detailed.

21 (b) Upon the request of any State health authority,  
22 personnel of the Service may be detailed by the Surgeon  
23 General for the purpose of assisting such State or a political  
24 subdivision thereof in work related to the functions of the  
25 Service.

1 (c) The Surgeon General may detail personnel of the  
2 Service to nonprofit educational, research, or other institu-  
3 tions engaged in health activities for special studies of scien-  
4 tific problems and for the dissemination of information  
5 relating to public health.

6 (d) Personnel detailed under subsections (b) and (c)  
7 shall be paid from applicable appropriations of the Service,  
8 except that, in accordance with regulations such personnel  
9 may be placed on leave without pay and paid by the State,  
10 subdivision, or institution to which they are detailed. The  
11 services of personnel while detailed pursuant to this section  
12 shall be considered as having been performed in the Service  
13 for purposes of longevity pay, promotion, retirement, com-  
14 pensation for injury or death, and the benefits provided by  
15 section 212.

#### 16 REGULATIONS

17 SEC. 215. (a) The President shall from time to time  
18 prescribe regulations with respect to the appointment, pro-  
19 motion, retirement, termination of commission, titles, pay,  
20 uniforms, allowances (including increased allowances for  
21 foreign service), and discipline of the commissioned corps  
22 of the Service.

23 (b) The Surgeon General, with the approval of the  
24 Administrator, unless specifically otherwise provided, shall  
25 promulgate all other regulations necessary to the administra-



tion of the Service, including regulations with respect to travel, transportation of household goods and effects, allotments from their pay by commissioned officers, and uniforms for employees, and regulations with respect to the custody, use, and preservation of the records, papers, and property of the Service.

(c) No regulation relating to qualifications for appointment of medical officers or employees shall give preference to any school of medicine.

#### USE OF SERVICE IN EMERGENCY

SEC. 216. In time of war, or of emergency proclaimed by the President, he may utilize the Service to such extent and in such manner as shall in his judgment promote the public interest, and in time of war he may by Executive order declare the commissioned corps of the Service to be a military service. Upon such declaration, and during the period of such war or such part thereof as the President shall prescribe, the commissioned corps (1) shall constitute a branch of the land and naval forces of the United States, and (2) to the extent prescribed by regulations of the President, shall be subject to the Articles of War and to the Articles for the Government of the Navy: *Provided*, That during such period or part thereof the commissioned corps shall continue to operate as part of the Service except to the extent that the President may direct as Commander in Chief.

## 1 NATIONAL ADVISORY HEALTH AND CANCER COUNCILS

2 SEC. 217. (a) The National Advisory Health Council  
3 shall consist of fourteen members. The Director of the Na-  
4 tional Institute of Health, and three experts, one each from  
5 the Army, the Navy, and the Bureau of Animal Industry, to  
6 be detailed by the Secretary of War, the Secretary of the  
7 Navy, and the Secretary of Agriculture, respectively, shall be  
8 ex officio members of the Council. The Surgeon General,  
9 with the approval of the Administrator, shall appoint, without  
10 regard to the civil-service laws, ten members of the Coun-  
11 cil who shall be persons, not otherwise in the employ of  
12 the United States, skilled in the sciences related to health.  
13 Each appointed member shall hold office for a term of  
14 five years, except that any member appointed to fill a  
15 vacancy occurring prior to the expiration of the term for  
16 which his predecessor was appointed shall be appointed for  
17 the remainder of such term. An appointed member shall not  
18 be eligible to serve continuously for more than five years  
19 but shall be eligible for reappointment if he has not served  
20 immediately preceding his reappointment.

21 (b) The National Advisory Health Council shall advise,  
22 consult with, and make recommendations to, the Surgeon  
23 General on matters relating to health activities and functions  
24 of the Service. The Surgeon General is authorized to utilize  
25 the services of any member or members of the Council, and

1 where appropriate, any member or members of the National  
2 Advisory Cancer Council in connection with matters related  
3 to the work of the Service, for such periods, in addition to  
4 conference periods, as he may determine.

5 (c) The National Advisory Cancer Council shall consist  
6 of the Surgeon General ex officio, who shall be Chairman, and  
7 of six members to be appointed without regard to the civil-  
8 service laws by the Surgeon General with the approval of the  
9 Administrator. The six appointed members shall be selected  
10 from leading medical or scientific authorities who are out-  
11 standing in the study, diagnosis, or treatment of cancer. Each  
12 appointed member shall hold office for a term of three years,  
13 except that any member appointed to fill a vacancy occurring  
14 prior to the expiration of the term for which his predecessor  
15 was appointed shall be appointed for the remainder of such  
16 term. An appointed member shall not be eligible to serve  
17 continuously for more than three years but shall be eligible  
18 for reappointment if he has not served immediately preceding  
19 his reappointment.

## 20 TITLE III—GENERAL POWERS AND DUTIES OF 21 PUBLIC HEALTH SERVICE

### 22 PART A—RESEARCH AND INVESTIGATIONS

#### 23 IN GENERAL

24 SEC. 301. The Surgeon General shall conduct in the  
25 Service, and encourage, cooperate with, and render assistance



1 to other appropriate public authorities, scientific institutions,  
2 and scientists in the conduct of, and promote the coordination  
3 of, research, investigations, experiments, demonstrations, and  
4 studies relating to the causes, diagnosis, treatment, control,  
5 and prevention of physical and mental diseases and impair-  
6 ments of man, including water purification, sewage treatment,  
7 and pollution of lakes and streams. In carrying out the fore-  
8 going the Surgeon General is authorized to—

9 (a) Collect and make available through publications  
10 and other appropriate means, information as to, and the  
11 practical application of, such research and other activities;

12 (b) Make available research facilities of the Service  
13 to appropriate public authorities, and to health officials  
14 and scientists engaged in special study;

15 (c) Establish and maintain research fellowships in  
16 the Service with such stipends and allowances, including  
17 traveling and subsistence expenses, as he may deem  
18 necessary to procure the assistance of the most brilliant  
19 and promising research fellows from the United States  
20 and abroad;

21 (d) Make grants in aid to universities, hospitals,  
22 laboratories, and other public or private institutions, and  
23 to individuals for such research projects as are recom-  
24 mended by the National Advisory Health Council, or,

1 with respect to cancer, recommended by the National  
2 Advisory Cancer Council;

3 (e) Secure from time to time and for such periods  
4 as he deems advisable, the assistance and advice of  
5 experts, scholars, and consultants from the United States  
6 or abroad;

7 (f) For purposes of study, admit and treat at in-  
8 stitutions, hospitals, and stations of the Service, persons  
9 not otherwise eligible for such treatment; and

10 (g) Adopt, upon recommendation of the National  
11 Advisory Health Council, or, with respect to cancer,  
12 upon recommendation of the National Advisory Cancer  
13 Council, such additional means as he deems necessary  
14 or appropriate to carry out the purposes of this section.

15 NARCOTICS

16 SEC. 302. (a) In carrying out the purposes of section  
17 301 with respect to narcotics, the studies and investigations  
18 shall include the use and misuse of narcotic drugs, the  
19 quantities of crude opium, coca leaves, and their salts, de-  
20 rivatives, and preparations, together with reserves thereof,  
21 necessary to supply the normal and emergency medicinal  
22 and scientific requirements of the United States. The results  
23 of studies and investigations of the quantities of crude opium,  
24 coca leaves, or other narcotic drugs, together with such re-  
25 serves thereof, as are necessary to supply the normal and

1 emergency medicinal and scientific requirements of the  
2 United States, shall be reported not later than the 1st day  
3 of September each year to the Secretary of the Treasury,  
4 to be used at his discretion in determining the amounts of  
5 crude opium and coca leaves to be imported under the Nar-  
6 cotic Drugs Import and Export Act, as amended.

7 (b) The Surgeon General shall cooperate with States  
8 for the purpose of aiding them to solve their narcotic drug  
9 problems and shall give authorized representatives of the  
10 States the benefit of his experience in the care, treatment, and  
11 rehabilitation of narcotic addicts to the end that each State  
12 may be encouraged to provide adequate facilities and methods  
13 for the care and treatment of its narcotic addicts.

14 PART B—FEDERAL-STATE COOPERATION

15 IN GENERAL

16 SEC. 311. The Surgeon General is authorized to accept  
17 from State and local authorities any assistance in the enforce-  
18 ment of quarantine regulations made pursuant to this Act  
19 which such authorities may be able and willing to provide.  
20 The Surgeon General shall also assist States and their political  
21 subdivisions in the prevention and suppression of communi-  
22 cable diseases, shall cooperate with and aid State and local  
23 authorities in the enforcement of their quarantine and other  
24 health regulations and in carrying out the purposes specified  
25 in section 314, and shall advise the several States on matters



1 relating to the preservation and improvement of the public  
2 health.

### 3 HEALTH CONFERENCES

4 SEC. 312. A conference of the health authorities of the  
5 several States shall be called annually by the Surgeon Gen-  
6 eral. Whenever in his opinion the interests of the public  
7 health would be promoted by a conference, the Surgeon  
8 General may invite as many of such health authorities to con-  
9 fer as he deems necessary or proper. Upon the application  
10 of health authorities of five or more States it shall be the duty  
11 of the Surgeon General to call a conference of all State and  
12 Territorial health authorities joining in the request. Each  
13 State represented at any conference shall be entitled to a  
14 single vote.

### 15 COLLECTION OF VITAL STATISTICS

16 SEC. 313. To secure uniformity in the registration of  
17 mortality, morbidity, and vital statistics the Surgeon General  
18 shall prepare and distribute suitable and necessary forms for  
19 the collection and compilation of such statistics which shall  
20 be published as a part of the health reports published by the  
21 Surgeon General.

### 22 GRANTS AND SERVICES TO STATES

23 SEC. 314. (a) To enable the Surgeon General to carry  
24 out the purposes of section 301 with respect to developing  
25 more effective measures for the prevention, treatment, and

1 control of venereal diseases, and to assist, through grants and  
2 as otherwise provided in this section, States, counties, health  
3 districts, and other political subdivisions of the States in  
4 establishing and maintaining adequate measures for the pre-  
5 vention, treatment, and control of such diseases, including the  
6 training of personnel for State and local health work, and to  
7 enable him to prevent and control the spread of the venereal  
8 diseases in interstate traffic, and to meet the cost of pay,  
9 allowances, and traveling expenses of commissioned officers  
10 and other personnel of the Service detailed to assist in  
11 carrying out the purposes of this section with respect to the  
12 venereal diseases, and to administer this section with respect  
13 to such diseases, there is hereby authorized to be appro-  
14 priated for each fiscal year a sum sufficient to carry out  
15 the purposes of this subsection.

16 (b) To enable the Surgeon General to assist, through  
17 grants and as otherwise provided in this section, States,  
18 counties, health districts, and other political subdivisions of  
19 the States in establishing and maintaining adequate public  
20 health services, including grants for demonstrations and for  
21 the training of personnel for State and local health work,  
22 there is hereby authorized to be appropriated for each fiscal  
23 year a sum not to exceed \$20,000,000. Of the sum appro-  
24 priated for each fiscal year pursuant to this subsection there  
25 shall be available an amount, not to exceed \$2,000,000, to

1 enable the Surgeon General to provide demonstrations and  
2 to train personnel for State and local health work and to  
3 meet the cost of pay, allowances, and traveling expenses  
4 of commissioned officers and other personnel of the Service  
5 detailed to assist States in carrying out the purposes of this  
6 subsection.

7 (c) For each fiscal year, the Surgeon General, with the  
8 approval of the Administrator, shall determine the total sum  
9 from the appropriation under subsection (a) and the total  
10 sum from the appropriation under subsection (b) which  
11 shall be available for allotment among the several States.  
12 He shall, in accordance with regulations, from time to time  
13 make allotments from such sums to the several States on  
14 the basis of (1) the population, (2) the size of the venereal-  
15 disease problem and the size of other special health problems,  
16 respectively, and (3) the financial need of the respective  
17 States. Upon making such allotments the Surgeon General  
18 shall notify the Secretary of the Treasury of the amounts  
19 thereof.

20 (d) The Surgeon General, with the approval of the  
21 Administrator, shall from time to time determine the amounts  
22 to be paid to each State from the allotments to such State,  
23 and shall certify to the Secretary of the Treasury, the amounts  
24 so determined, reduced or increased, as the case may be, by  
25 the amounts by which he finds that estimates of required



1 expenditures with respect to any prior period were greater  
2 or less than the actual expenditures for such period. Upon  
3 receipt of such certification, the Secretary of the Treasury  
4 shall, through the Division of Disbursement of the Treasury  
5 Department and prior to audit or settlement by the General  
6 Accounting Office, pay in accordance with such certification.

7 (e) The moneys so paid to any State shall be ex-  
8 pended solely in carrying out the purposes specified in sub-  
9 section (a) or subsection (b) of this section, as the case  
10 may be, and in accordance with plans presented by the  
11 health authority of such State and approved by the Surgeon  
12 General.

13 (f) Money so paid shall be paid upon the condition that  
14 there shall be spent in such State for the same general pur-  
15 pose from funds of such State and its political subdivisions  
16 an amount determined in accordance with regulations.

17 (g) Whenever the Surgeon General, after reasonable  
18 notice and opportunity for hearing to the health authority of  
19 the State, finds that, with respect to money paid to the State  
20 out of appropriations under subsection (a) or subsection  
21 (b), as the case may be, there is a failure to comply sub-  
22 stantially with either—

- 23 (1) the provisions of this section;  
24 (2) the plan submitted under subsection (e); or  
25 (3) the regulations;

1 the Surgeon General shall notify such State health authority  
2 either that further payments will not be made to the State  
3 from appropriations under such subsection (or in his discre-  
4 tion that further payments will not be made to the State  
5 from such appropriations for activities in which there is such  
6 failure), until he is satisfied that there will no longer be any  
7 such failure. Until he is so satisfied the Surgeon General  
8 shall make no further certification for payment to such State  
9 from appropriations under such subsection, or shall limit  
10 payment to activities in which there is no such failure.

11 (h) All regulations and amendments thereto with re-  
12 spect to grants to States under this section shall be made  
13 after consultation with a conference of the State health  
14 authorities. Insofar as practicable, the Surgeon General shall  
15 obtain the agreement of the State health authorities prior to  
16 the issuance of any such regulations or amendments.

17 (i) Funds appropriated under subsection (a) of this  
18 section, in addition to being available for payments to States,  
19 shall also be available for expenditure by the Surgeon Gen-  
20 eral in otherwise carrying out such subsection, including  
21 expenditures for printing and binding of the findings of  
22 investigations, and for pay and allowances and traveling  
23 expenses of personnel of the Service engaged in activities  
24 authorized by such subsection.

## 1 HEALTH EDUCATION AND INFORMATION

2 SEC. 315. From time to time the Surgeon General shall  
3 issue information related to public health, in the form of publi-  
4 cations or otherwise, for the use of the public, and shall  
5 publish weekly reports of health conditions in the United  
6 States and other countries and other pertinent health informa-  
7 tion for the use of persons and institutions engaged in work  
8 related to the functions of the Service.

## 9 PART C—HOSPITALS, MEDICAL EXAMINATIONS, AND

## 10 MEDICAL CARE

## 11 HOSPITALS

12 SEC. 321. The Surgeon General, pursuant to regulations,  
13 shall—

14 (a) Control, manage, and operate all institutions,  
15 hospitals, and stations of the Service, and provide for  
16 the care, treatment and hospitalization of patients, includ-  
17 ing the furnishing of prosthetic and orthopedic devices;

18 (b) Provide for the transfer of Public Health Serv-  
19 ice patients, in the care of attendants where necessary,  
20 between hospitals and stations operated by the Service  
21 or between such hospitals and stations and other hos-  
22 pitals and stations in which Public Health Service  
23 patients may be received, and the payment of expenses  
24 of such transfer;



(c) Provide for the disposal of articles produced by patients in the course of their curative treatment, either by allowing the patient to retain such articles or by selling them and depositing the money received therefor to the credit of the appropriation from which the materials for making the articles were purchased; and

8 (d) Provide for the disposal of money and effects,  
9 in the custody of the hospitals or stations, of deceased  
10 patients.

11 CARE AND TREATMENT OF SEAMEN AND CERTAIN OTHER  
12 PERSONS

13 SEC. 322. (a) The following persons shall be entitled,  
14 in accordance with regulations, to medical, surgical, and  
15 dental treatment and hospitalization without charge at hos-  
16 pitals and other stations of the Service:

(1) Seamen employed on vessels of the United States registered, enrolled, and licensed under the maritime laws thereof, other than canal boats engaged in the coasting trade;

(2) Seamen employed on United States or foreign  
flag vessels as employees of the United States through  
the War Shipping Administration;

(3) Seamen, not enlisted or commissioned in the military or naval establishments, who are employed on

1 State school ships or on vessels of the United States  
2 Government of more than five tons' burden;

3 (4) Cadets at State maritime academies or on State  
4 training ships;

5 (5) Seamen on vessels of the Mississippi River  
6 Commission and, upon application of their commanding  
7 officers, officers and crews of vessels of the Fish and  
8 Wildlife Service;

9 (6) Enrollees in the United States Maritime Service  
10 on active duty and members of the Merchant Marine  
11 Cadet Corps; and

12 (7) Employees and noncommissioned officers in the  
13 field service of the Public Health Service when injured  
14 or taken sick in line of duty.

15 (b) When suitable accommodations are available, sea-  
16 men on foreign-flag vessels may be given medical, surgical,  
17 and dental treatment and hospitalization on application of  
18 the master, owner, or agent of the vessel at hospitals and  
19 other stations of the Service at rates fixed by regulations.  
20 All expenses connected with such treatment, including burial  
21 in the event of death, shall be paid by such master, owner,  
22 or agent. No such vessel shall be granted clearance until  
23 such expenses are paid or their payment appropriately guar-  
24 anteed to the Collector of Customs.

25 (c) Any person when detained in accordance with quar-

1 antine laws, or, at the request of the Immigration and Natu-  
2 ralization Service, any person detained by that Service, may  
3 be treated and cared for by the Public Health Service.

4 (d) Persons not entitled to treatment and care at insti-  
5 tutions, hospitals, and stations of the Service may, in accord-  
6 ance with regulations of the Surgeon General, be admitted  
7 thereto for temporary treatment and care in case of  
8 emergency.

9 (e) Persons entitled to care and treatment under subsec-  
10 tion (a) of this section may, in accordance with regulations,  
11 receive such care and treatment at the expense of the Service  
12 from public or private medical or hospital facilities other than  
13 those of the Service, when authorized by the officer in charge  
14 of the station at which the application is made.

15 CARE AND TREATMENT OF FEDERAL PRISONERS

16 SEC. 323. The Service shall supervise and furnish med-  
17 ical treatment and other necessary medical, psychiatric, and  
18 related technical and scientific services, authorized by the  
19 Act of May 13, 1930, as amended (U. S. C., 1940 edition,  
20 title 18, secs. 751, 752), in penal and correctional in-  
21 stitutions of the United States.

22 EXAMINATION AND TREATMENT OF FEDERAL EMPLOYEES

23 SEC. 324. The Surgeon General is authorized to provide  
24 at institutions, hospitals, and stations of the Service medical,  
25 surgical, and hospital services and supplies for persons en-



1 titled to treatment under the United States Employees' Com-  
2 pension Act and extensions thereof. The Surgeon General  
3 may also provide for making medical examinations of—

4 (a) employees of the Alaska Railroad and employ-  
5 ees of the Federal Government for retirement purposes;

6 (b) employees in the Federal classified service, and  
7 applicants for appointment, as requested by the Civil  
8 Service Commission for the purpose of promoting health  
9 and efficiency;

10 (c) seamen for purposes of qualifying for cer-  
11 tificates of service; and

12 (d) employees eligible for benefits under the  
13 Longshoremen's and Harbor Workers' Compensation  
14 Act, as amended (U. S. C., 1940 edition, title 33,  
15 chapter 18), as requested by any deputy commis-  
16 sioner thereunder.

17 EXAMINATION OF ALIENS

18 SEC. 325. The Surgeon General shall provide for making,  
19 at places within the United States or in other countries,  
20 such physical and mental examinations of aliens as are  
21 required by the immigration laws, subject to administra-  
22 tive regulations prescribed by the Attorney General and  
23 medical regulations prescribed by the Surgeon General with  
24 the approval of the Administrator.

1 SERVICES TO COAST GUARD, COAST AND GEODETIC SURVEY,  
2 AND PUBLIC HEALTH SERVICE

3 SEC. 326. (a) Subject to regulations of the President—

4 (1) commissioned officers, chief warrant officers.  
5 warrant officers, cadets, and enlisted personnel of the  
6 Regular Coast Guard, including those on shore duty  
7 and those on detached duty, whether on active duty  
8 or retired; and Regular and temporary members of  
9 the United States Coast Guard Reserve when on active  
10 duty or when retired for disability;

11 (2) commissioned officers, ships' officers, and  
12 members of the crews of vessels of the United States  
13 Coast and Geodetic Survey, including those on shore  
14 duty and those on detached duty, whether on active  
15 duty or retired; and

16 (3) commissioned officers of the Regular Corps  
17 of the Public Health Service, whether on active duty  
18 or retired, and commissioned officers of the Reserve  
19 Corps when on active duty or when retired for dis-  
20 ability;

21 shall be entitled to medical, surgical, and dental treatment  
22 and hospitalization by the Service. The Surgeon General  
23 may detail commissioned officers for duty aboard vessels of  
24 the Coast Guard or the Coast and Geodetic Survey.

25 (b) Subject to regulations of the President, the depend-

ent members of families (as defined in such regulations) of persons specified in subsection (a), other than temporary members of the United States Coast Guard Reserve, shall be furnished medical advice and out-patient treatment by the Service at its hospitals and relief stations, and they shall also be furnished hospitalization at hospitals of the Service, if suitable accommodations are available, at a per diem cost to the officer, enlisted person, or member of a crew concerned. Such cost shall be at such uniform rate as may be prescribed in such regulations of the President.

(c) The Service shall provide all services referred to in subsection (a) required by the Coast Guard and shall perform all duties prescribed by statute in connection with the examinations to determine physical or mental condition for purposes of appointment, enlistment, and reenlistment, promotion and retirement, and officers of the Service assigned to duty on Coast Guard vessels may extend aid to the crews of American vessels engaged in deep-sea fishing.

#### INTERDEPARTMENTAL WORK

SEC. 327. Nothing contained in this part shall affect the authority of the Service to furnish any materials, supplies, or equipment, or perform any work or services, requested in accordance with section 7 of the Act of May 21, 1920, as amended (U. S. C., 1940 edition, title 31, sec. 686), or the authority of any other executive department



1 to furnish any materials, supplies, or equipment, or perform  
2 any work or services, requested by the Federal Security  
3 Agency for the Service in accordance with that section.

4 PART D—LEPERS

5 RECEIPT OF LEPERS

6 SEC. 331. The Service shall, in accordance with regu-  
7 lations, receive into any hospital of the Service suitable for  
8 his accommodation any person afflicted with leprosy who  
9 presents himself for care, detention, or treatment, or who may  
10 be apprehended under section 332 or 361 of this Act, and  
11 any person afflicted with leprosy duly consigned to the care  
12 of the Service by the proper health authority of any State,  
13 Territory, or the District of Columbia. The Surgeon General  
14 is authorized, upon the request of any health authority, to  
15 send for any person within the jurisdiction of such authority  
16 who is afflicted with leprosy and to convey such person to the  
17 appropriate hospital for detention and treatment. When the  
18 transportation of any such person is undertaken for the pro-  
19 tection of the public health the expense of such removal shall  
20 be met from funds available for the maintenance of hospitals  
21 of the Service.

22 APPREHENSION, DETENTION, TREATMENT, AND RELEASE

23 SEC. 332. The Surgeon General may provide by regu-  
24 lation for the apprehension, detention, treatment, and release  
25 of persons being treated by the Service for leprosy.

## PART E—NARCOTICS ADDICTS

## CARE AND TREATMENT

SEC. 341. The Surgeon General is authorized to provide for the confinement, care, protection, treatment, and discipline of persons addicted to the use of habit-forming narcotic drugs who voluntarily submit themselves for treatment and addicts who have been or are hereafter convicted of offenses against the United States, including persons convicted by general courts martial and consular courts. Such care and treatment shall be provided at hospitals of the Service especially equipped for the accommodation of such patients and shall be designed to rehabilitate such persons, to restore them to health, and, where necessary, to train them to be self-supporting and self-reliant.

## EMPLOYMENT OF ADDICTS

SEC. 342. Narcotic addicts in hospitals of the Service designated for their care shall be employed in such manner and under such conditions as the Surgeon General may direct. In such hospitals the Surgeon General may, in his discretion, establish industries, plants, factories, or shops for the production and manufacture of articles, commodities, and supplies for the United States Government. The Secretary of the Treasury may require any Government department, establishment, or other institution, for whom appropriations are

1 made directly or indirectly by the Congress of the United  
2 States, to purchase at current market prices, as determined  
3 by him or his authorized representative, such of the articles,  
4 commodities, or supplies so produced or manufactured as  
5 meet their specifications; and the Surgeon General shall pro-  
6 vide for payment to the inmates or their dependents of such  
7 pecuniary earnings as he may deem proper. The Adminis-  
8 trator shall establish a working-capital fund for such in-  
9 dustries, plants, factories, and shops out of any funds appro-  
10 priated for Public Health Service hospitals at which addicts  
11 are treated and cared for; and such fund shall be available  
12 for the purchase, repair, or replacement of machinery or  
13 equipment, for the purchase of raw materials and supplies,  
14 for the purchase of uniforms and other distinctive wearing  
15 apparel of employees in the performance of their official  
16 duties, and for the employment of necessary civilian officers  
17 and employees. The Surgeon General may provide for the  
18 disposal of products of the industrial activities conducted  
19 pursuant to this section, and the proceeds of any sales thereof  
20 shall be covered into the Treasury of the United States to  
21 the credit of the working-capital fund.

22

## CONVICTS

23 SEC. 343. (a) The authority vested with the power to  
24 designate the place of confinement of a prisoner shall transfer  
25 to hospitals of the Service especially equipped for the ac-



1 commodation of addicts, if accommodations are available,  
2 all addicts who have been or are hereafter sentenced to con-  
3 finement, or who are now or shall hereafter be confined, in  
4 any penal, correctional, disciplinary, or reformatory institu-  
5 tion of the United States, including those addicts convicted  
6 of offenses against the United States who are confined in  
7 State and Territorial prisons, penitentiaries, and reformatories,  
8 except that no addict shall be transferred to a hospital of the  
9 Service who, in the opinion of the officer authorized to direct  
10 the transfer, is not a proper subject for confinement in such  
11 an institution either because of the nature of the crime he has  
12 committed or because of his apparent incorrigibility. The  
13 authority vested with the power to designate the place of  
14 confinement of a prisoner shall transfer from a hospital of the  
15 Service to the institution from which he was received, or to  
16 such other institution as may be designated by the proper  
17 authority, any addict whose presence at a hospital of the  
18 Service is detrimental to the well-being of the hospital or who  
19 does not continue to be a narcotic addict. All transfers of  
20 such prisoners to or from a hospital of the Service shall be  
21 accompanied by necessary attendants as directed by the  
22 officer in charge of such hospital and the actual and necessary  
23 expenses incident to such transfers shall be paid from the  
24 appropriation for the maintenance of such Service hospital  
25 except to the extent that other Federal agencies are author-

1 ized or required by law to pay expenses incident to such  
2 transfers. Whenever an alien addict transferred to a Serv-  
3 ice hospital pursuant to this subsection is entitled to his dis-  
4 charge but is subject to deportation, in lieu of being returned  
5 to the penal institution from which he came he shall be de-  
6 ported by the authority vested by law with power over  
7 deportation.

8 (b) The provisions of the Act of June 21, 1902, as  
9 amended (U. S. C., 1940 edition, title 18, secs. 710-712a),  
10 regulating commutation of sentence for good conduct of  
11 United States prisoners, section 8 of the Act of May 27, 1930  
12 (U. S. C., 1940 edition, title 18, sec. 744h), regulating  
13 commutation of sentence for employment in industry, and  
14 the Act of June 25, 1910, as amended (U. S. C., 1940  
15 edition, title 18, secs. 714-723c), relating to parole, shall be  
16 applicable to any narcotic addict confined in any institution  
17 in execution of a judgment or sentence upon conviction of  
18 an offense against the United States; except that no narcotic  
19 addict confined in any institution, whether or not an institu-  
20 tion of the Public Health Service, shall be released by reason  
21 of commutation of sentence or parole until the Surgeon  
22 General shall have certified that such individual is no longer  
23 an addict.

24 (c) Not later than one month prior to the expiration  
25 of the sentence of any addict confined in a Service hospital,

1 he shall be examined by the Surgeon General or his author-  
2 ized representative. If the Surgeon General believes the  
3 person to be discharged is still an addict and that he may by  
4 further treatment in a Service hospital be cured of his ad-  
5 diction, the addict shall be informed, in accordance with  
6 regulations, of the advisability of his submitting himself to  
7 further treatment. The addict may then apply in writing  
8 to the Surgeon General for further treatment in a Service  
9 hospital for a period not exceeding the maximum length of  
10 time considered necessary by the Surgeon General. Upon  
11 approval of the application by the Surgeon General or his  
12 authorized agent, the addict may be given such further  
13 treatment as is necessary to cure him of his addiction.

14 (d) Every person convicted of an offense against the  
15 United States, upon discharge, or upon release on parole,  
16 from a hospital of the Service, shall be furnished with the gra-  
17 tuities and transportation authorized by law to be furnished  
18 to prisoners upon release from a penal, correctional, disci-  
19 plinary, or reformatory institution.

20 (e) Any court of the United States having the power  
21 to suspend the imposition or execution of sentence and to  
22 place a defendant on probation under any existing laws may  
23 impose as one of the conditions of such probation that the  
24 defendant, if an addict, shall submit himself for treatment  
25 at a hospital of the Service especially equipped for the



1 accommodation of addicts until discharged therefrom as  
2 cured and that he shall be admitted thereto for such purpose.  
3 Upon the discharge of any such probationer from a hospital  
4 of the Service, he shall be furnished with the gratuities and  
5 transportation authorized by law to be furnished to prisoners  
6 upon release from a penal, correctional, disciplinary, or  
7 reformatory institution. The actual and necessary expense  
8 incident to transporting such probationer to such hospital  
9 and to furnishing such transportation and gratuities shall  
10 be paid from the appropriation for the maintenance of such  
11 hospital except to the extent that other Federal agencies  
12 are authorized or required by law to pay the cost of such  
13 transportation: *Provided*, That where existing law vests a  
14 discretion in any officer as to the place to which transporta-  
15 tion shall be furnished or as to the amount of clothing and  
16 gratuities to be furnished, such discretion shall be exercised  
17 by the Surgeon General with respect to addicts discharged  
18 from hospitals of the Service.

19

## VOLUNTARY PATIENTS

20 SEC. 344. (a) Any addict, whether or not he shall have  
21 been convicted of an offense against the United States, may  
22 apply to the Surgeon General for admission to a hospital  
23 of the Service especially equipped for the accommodation  
24 of addicts.

25

(b) Any applicant shall be examined by the Surgeon

1 General who shall determine whether the applicant is an  
2 addict, whether by treatment in a hospital of the Service he  
3 may probably be cured of his addiction, and the estimated  
4 length of time necessary to effect his cure. The Surgeon  
5 General may, in his discretion, admit the applicant to a Serv-  
6 ice hospital. No such addict shall be admitted unless he  
7 agrees to submit to treatment for the maximum amount of  
8 time estimated by the Surgeon General to be necessary to  
9 effect a cure, and unless suitable accommodations are avail-  
10 able after all eligible addicts convicted of offenses against  
11 the United States have been admitted. Any such addict  
12 may be required to pay for his subsistence, care, and treat-  
13 ment at rates fixed by the Surgeon General and amounts so  
14 paid shall be covered into the Treasury of the United States  
15 to the credit of the appropriation from which the expenditure  
16 for his subsistence, care, and treatment was made.

17 (d) Any addict admitted for treatment under this sec-  
18 tion, including any addict, not convicted of an offense, who  
19 voluntarily submits himself for treatment, may be confined  
20 in a hospital of the Service for a period not exceeding the  
21 maximum amount of time estimated by the Surgeon General  
22 as necessary to effect a cure of the addiction or until such  
23 time as he ceases to be an addict.

24 (c) Any addict admitted for treatment under this sec-  
25 tion shall not thereby forfeit or abridge any of his rights as a

1 citizen of the United States; nor shall such admission or  
2 treatment be used against him in any proceeding in any  
3 court; and the record of his voluntary commitment shall be  
4 confidential and shall not be divulged.

5 PENALTIES

6 SEC. 345. (a) Any person not authorized by law or by  
7 the Surgeon General who introduces or attempts to intro-  
8 duce into or upon the grounds of any hospital of the Service  
9 at which addicts are treated and cared for, any habit-  
10 forming narcotic drug, weapon, or any other contraband  
11 article or thing, or any contraband letter or message intended  
12 to be received by an inmate thereof, shall be guilty of a felony  
13 and, upon conviction thereof, shall be punished by imprison-  
14 ment for not more than ten years.

15 (b) It shall be unlawful for any person properly com-  
16 mitted thereto to escape or attempt to escape from a hos-  
17 pital of the Service at which addicts are treated and cared  
18 for, and any such person upon apprehension and conviction  
19 in a United States court shall be punished by imprisonment  
20 for not more than five years, such sentence to begin upon  
21 the expiration of the sentence for which such person was  
22 originally confined.

23 (c) Any person who procures the escape of any person  
24 admitted to a hospital of the Service at which addicts are  
25 treated and cared for, or who advises, connives at, aids, or



1 assists in such escape, or who conceals any such inmate  
2 after such escape, shall be punished upon conviction in a  
3 United States court by imprisonment in the penitentiary  
4 for not more than three years.

5                   PART F—BIOLOGICAL PRODUCTS

6                   REGULATION OF BIOLOGICAL PRODUCTS

7       SEC. 351. (a) No person shall sell, barter, or exchange,  
8 or offer for sale, barter, or exchange in the District of Colum-  
9 bia, or send, carry, or bring for sale, barter, or exchange  
10 from any State or possession into any other State or pos-  
11 session or into any foreign country, or from any foreign  
12 country into any State or possession, any virus, therapeutic  
13 serum, toxin, antitoxin, or analogous product, or arsphen-  
14 mine or its derivatives (or any other trivalent organic arsenic  
15 compound), applicable to the prevention, treatment, or cure  
16 of diseases or injuries of man, unless (1) such virus, serum,  
17 toxin, antitoxin, or other product has been propagated or  
18 manufactured and prepared at an establishment holding an  
19 unsuspended and unrevoked license, issued by the Adminis-  
20 trator as hereinafter authorized, to propagate or manufacture,  
21 and prepare such virus, serum, toxin, antitoxin, or other  
22 product for sale in the District of Columbia, or for sending,  
23 bringing, or carrying from place to place aforesaid; and (2)  
24 each package of such virus, serum, toxin, antitoxin, or other  
25 product is plainly marked with the proper name of the article

1 contained therein, the name, address, and license number of  
2 the manufacturer, and the date beyond which the contents  
3 cannot be expected beyond reasonable doubt to yield their  
4 specific results. The suspension or revocation of any license  
5 shall not prevent the sale, barter, or exchange of any virus,  
6 serum, toxin, antitoxin, or other product aforesaid which has  
7 been sold and delivered by the licensee prior to such sus-  
8 pension or revocation, unless the owner or custodian of such  
9 virus, serum, toxin, antitoxin, or other product aforesaid has  
10 been notified by the Administrator not to sell, barter, or  
11 exchange the same.

12 (b) No person shall falsely label or mark any package  
13 or container of any virus, serum, toxin, antitoxin, or other  
14 product aforesaid; nor alter any label or mark on any pack-  
15 age or container of any virus, serum, toxin, antitoxin, or other  
16 product aforesaid so as to falsify such label or mark.

17 (c) Any officer, agent, or employee of the Federal Secu-  
18 rity Agency, authorized by the Administrator for the purpose,  
19 may during all reasonable hours enter and inspect any estab-  
20 lishment for the propagation or manufacture and preparation  
21 of any virus, serum, toxin, antitoxin, or other product afore-  
22 said for sale, barter, or exchange in the District of Columbia,  
23 or to be sent, carried, or brought from any State or possession  
24 into any other State or possession or into any foreign country,  
25 or from any foreign country into any State or possession.

1       (d) Licenses for the maintenance of establishments for  
2 the propagation or manufacture and preparation of products  
3 described in subsection (a) of this section may be issued only  
4 upon a showing that the establishment and the products for  
5 which a license is desired meet standards, designed to insure  
6 the continued safety, purity, potency and efficaciousness of  
7 such products, prescribed in regulations made jointly by the  
8 Surgeon General, the Surgeon General of the Army, and the  
9 Surgeon General of the Navy, and approved by the Adminis-  
10 trator, and licenses for new products may be issued only upon  
11 a showing that they meet such standards. All such licenses  
12 shall be issued, suspended, and revoked as prescribed by regu-  
13 lations and all licenses issued for the maintenance of estab-  
14 lishments for the propagation or manufacture and prepara-  
15 tion, in any foreign country, of any such products for sale,  
16 barter, or exchange in any State or possession shall be issued  
17 upon condition that the licensees will permit the inspection  
18 of their establishments in accordance with subsection (c)  
19 of this section.

20       (e) No person shall interfere with any officer, agent,  
21 or employee of the Service in the performance of any duty  
22 imposed upon him by this section or by regulations made  
23 by authority thereof.

24       (f) Any person who shall violate, or aid or abet in  
25 violating, any of the provisions of this section shall be pun-



1 ished upon conviction by a fine not exceeding \$500 or by  
2 imprisonment not exceeding one year, or by both such fine  
3 and imprisonment, in the discretion of the court.

4 (g) The persons and the products to which this section  
5 is applicable shall be subject also to the provisions of the  
6 Federal Food, Drug, and Cosmetic Act, except that sec-  
7 tion 505 of such Act shall not apply in the case of any virus,  
8 serum, toxin, antitoxin, or other product propagated, manu-  
9 factured, or prepared pursuant to an unsuspended and un-  
10 revoked license issued under this section.

11 PREPARATION OF BIOLOGICAL PRODUCTS

12 SEC. 352. (a) The Service may prepare for its own use  
13 any product described in section 351 and any product neces-  
14 sary to carrying out any of the purposes of section 301.

15 (b) The Service may prepare any product described in  
16 section 351 for the use of other Federal departments or  
17 agencies, and public or private agencies and individuals  
18 engaged in work in the field of medicine when such product  
19 is not available from establishments licensed under such  
20 section.

21 PART G—QUARANTINE AND INSPECTION

22 CONTROL OF COMMUNICABLE DISEASES

23 SEC. 361. (a) The Surgeon General, with the approval  
24 of the Administrator, is authorized to make and enforce such  
25 regulations as in his judgment are necessary to prevent the

1 introduction, transmission, or spread of communicable diseases  
2 from foreign countries into the States or possessions, or from  
3 one State or possession into any other State or possession.  
4 For purposes of carrying out and enforcing such regulations,  
5 the Surgeon General may provide for such inspection, fumi-  
6 gation, disinfection, sanitation, pest extermination, destruction  
7 of animals or articles found to be so infected or contaminated  
8 as to be sources of dangerous infection to human beings, and  
9 other measures, as in his judgment may be necessary.

10 (b) Regulations prescribed under this section shall not  
11 provide for the apprehension, detention, or conditional re-  
12 lease of individuals except for the purpose of preventing the  
13 introduction, transmission, or spread of such communicable  
14 diseases as may be specified from time to time in Executive  
15 orders of the President upon the recommendation of the Na-  
16 tional Advisory Health Council and the Surgeon General.

17 (c) Except as provided in subsection (d), regulations  
18 prescribed under this section, insofar as they provide for  
19 the apprehension, detention, examination, or conditional re-  
20 lease of individuals, shall be applicable only to individuals  
21 coming into a State or possession from a foreign country, the  
22 Territory of Hawaii, or a possession.

23 (d) On recommendation of the National Advisory  
24 Health Council, regulations prescribed under this section may  
25 provide for the apprehension and examination of any indi-

vidual reasonably believed to be infected with a communi-  
cable disease in a communicable stage and (1) to be mov-  
ing or about to move from a State to another State; or (2)  
to be a probable source of infection to individuals who, while  
infected with such disease in a communicable stage, will be  
moving from a State to another State. Such regulations may  
provide that if upon examination any such individual is  
found to be infected, he may be detained for such time and  
in such manner as may be reasonably necessary.

## 10 SUSPENSION OF ENTRIES AND IMPORTS FROM DESIGNATED

## 11 PLACES

12        SEC. 362. Whenever the Surgeon General determines  
13        that by reason of the existence of any communicable disease  
14        in a foreign country there is serious danger of the introduction  
15        of such disease into the United States, and that this danger  
16        is so increased by the introduction of persons or property from  
17        such country that a suspension of the right to introduce such  
18        persons and property is required in the interest of the public  
19        health, the Surgeon General, in accordance with regulations  
20        approved by the President, shall have the power to prohibit,  
21        in whole or in part, the introduction of persons and property  
22        from such countries or places as he shall designate in order to  
23        avert such danger, and for such period of time as he may  
24        deem necessary for such purpose.



## SPECIAL POWERS IN TIME OF WAR

SEC. 363. To protect the military and naval forces and war workers of the United States, in time of war, against any communicable disease specified in Executive orders as provided in subsection (b) of section 361, the Surgeon General, on recommendation of the National Advisory Health Council, is authorized to provide by regulations for the apprehension and examination, in time of war, of any individual reasonably believed (1) to be infected with such disease in a communicable stage and (2) to be a probable source of infection to members of the armed forces of the United States or to individuals engaged in the production or transportation of arms, munitions, ships, food, clothing, or other supplies for the armed forces. Such regulations may provide that if upon examination any such individual is found to be so infected, he may be detained for such time and in such manner as may be reasonably necessary.

## QUARANTINE STATIONS

SEC. 364. (a) Except as provided in title II of the Act of June 15, 1917, as amended (U. S. C., 1940 edition, title 50, secs. 191-194), the Surgeon General shall control, direct, and manage all United States quarantine stations, grounds, and anchorages, designate their boundaries, and designate the quarantine officers to be in charge thereof. With the approval of the President

1 he shall from time to time select suitable sites for and estab-  
2 lish such additional stations, grounds, and anchorages in  
3 the States and possessions of the United States as in his  
4 judgment are necessary to prevent the introduction of com-  
5 municable diseases into the States and possessions of the  
6 United States.

7 (b) The Surgeon General shall establish the hours dur-  
8 ing which quarantine service shall be performed at each  
9 quarantine station, and, upon application by any interested  
10 party, may establish quarantine inspection during the twenty-  
11 four hours of the day, or any fraction thereof, at such quar-  
12 antine stations as, in his opinion, require such extended serv-  
13 ice. He may restrict the performance of quarantine inspec-  
14 tion to hours of daylight for such arriving vessels as cannot,  
15 in his opinion, be satisfactorily inspected during hours of  
16 darkness. No vessel shall be required to undergo quarantine  
17 inspection during the hours of darkness, unless the quarantine  
18 officer at such quarantine station shall deem an immediate  
19 inspection necessary to protect the public health. Uniformity  
20 shall not be required in the hours during which quarantine  
21 inspection may be obtained at the various ports of the United  
22 States.

23 CERTAIN DUTIES OF CONSULAR AND OTHER OFFICERS

24 SEC. 365. (a) Any consular or medical officer of the  
25 United States, designated for such purpose by the Adminis-

1 trator, shall make reports to the Surgeon General, on such  
2 forms and at such intervals as the Surgeon General may  
3 prescribe, of the health conditions at the port or place at  
4 which such officer is stationed.

5 (b) It shall be the duty of the customs officers and of  
6 Coast Guard officers to aid in the enforcement of quarantine  
7 rules and regulations; but no additional compensation, except  
8 actual and necessary traveling expenses, shall be allowed any  
9 such officer by reason of such services.

10 **BILLS OF HEALTH**

11 SEC. 366. (a) Any vessel at any foreign port or place  
12 clearing or departing for any port or place in a State or  
13 possession shall be required to obtain from the consular officer  
14 of the United States or from the Public Health Service officer,  
15 or other medical officer of the United States designated by  
16 the Surgeon General, at the port or place of departure, a bill  
17 of health in duplicate, in the form prescribed by the Surgeon  
18 General. The President, from time to time, shall specify  
19 the ports at which a medical officer shall be stationed for  
20 this purpose. Such bill of health shall set forth the sanitary  
21 history and condition of said vessel, and shall state that it  
22 has in all respects complied with the regulations prescribed  
23 pursuant to subsection (c). Before granting such duplicate  
24 bill of health, such consular or medical officer shall be satis-  
25 fied that the matters and things therein stated are true.



1 The consular officer shall be entitled to demand and receive  
2 the fees for bills of health and such fees shall be established  
3 by regulation.

4 (b) Original bills of health shall be delivered to the  
5 collectors of customs at the port of entry. Duplicate copies  
6 of such bills of health shall be delivered at the time of  
7 inspection to quarantine officers at such port. The bills of  
8 health herein prescribed shall be considered as part of the  
9 ship's papers, and when duly certified to by the proper con-  
10 sular or other officer of the United States, over his official  
11 signature and seal, shall be accepted as evidence of the  
12 statements therein contained in any court of the United  
13 States.

14 (c) The Surgeon General shall from time to time pre-  
15 scribe regulations, applicable to vessels referred to in sub-  
16 section (a) of this section for the purpose of preventing the  
17 introduction into the States or possessions of the United  
18 States of any communicable disease by securing the best  
19 sanitary condition of such vessels, their cargoes, passengers,  
20 and crews. Such regulations shall be observed by such  
21 vessels prior to departure, during the course of the voyage.  
22 and also during inspection, disinfection, or other quarantine  
23 procedure upon arrival at any United States quarantine  
24 station.

25 (d) The provisions of subsections (a) and (b) of this

1 section shall not apply to vessels plying between such foreign  
2 ports on or near the frontiers of the United States and ports  
3 of the United States as are designated by treaty or may be  
4 designated by regulation; nor, to the extent prescribed by  
5 regulations, to such of the other vessels referred to in sub-  
6 section (a) hereof as may be designated in such regulations.

7 (e) It shall be unlawful for any vessel to enter any port  
8 in any State or possession of the United States to discharge  
9 its cargo, or land its passengers, except upon a certificate  
10 of the quarantine officer that regulations prescribed under  
11 subsection (c) have in all respects been complied with by  
12 such officer, the vessel, and its master. The master of every  
13 such vessel shall deliver such certificate to the collector of  
14 customs at the port of entry, together with the original bill  
15 of health and other papers of the vessel.

#### 16 CIVIL AIR NAVIGATION AND CIVIL AIRCRAFT

17 SEC. 367. The Surgeon General is authorized to pro-  
18 vide by regulations for the application to civil air navigation  
19 and civil aircraft of any of the provisions of sections 364,  
20 365, and 366 and regulations prescribed thereunder (includ-  
21 ing penalties and forfeitures for violations of such sections and  
22 regulations), to such extent and upon such conditions as  
23 he deems necessary for the safeguarding of the public health.

#### 24 PENALTIES

25 SEC. 368. (a) Any person who violates any regula-

1 tion prescribed under section 361, 362, or 363, or any  
2 provision of section 366 or any regulation prescribed there-  
3 under, or who enters or departs from the limits of any quar-  
4 antine station, ground, or anchorage in disregard of quaran-  
5 tine rules and regulations or without permission of the  
6 quarantine officer in charge, shall be punished by a fine of  
7 not more than \$1,000 or by imprisonment for not more than  
8 one year, or both.

9 (b) Any vessel which violates section 364 or section  
10 366, or any regulations thereunder, or under section 367,  
11 or which enters within or departs from the limits of any  
12 quarantine station, ground, or anchorage in disregard of  
13 the quarantine rules and regulations or without permission  
14 of the officer in charge, shall forfeit to the United States  
15 not more than \$5,000, the amount to be determined by  
16 the court, which shall be a lien on such vessel, to be recov-  
17 ered by proceedings in the proper district court of the United  
18 States. In all such proceedings the United States district  
19 attorney shall appear on behalf of the United States; and all  
20 such proceedings shall be conducted in accordance with the  
21 rules and laws governing cases of seizure of vessels for vio-  
22 lation of the revenue laws of the United States.

23 (c) With the approval of the Administrator, the Surgeon  
24 General may, upon application therefor, remit or mitigate any  
25 forfeiture provided for under subsection (b) of this section,



1 and he shall have authority to ascertain the facts upon all  
2 such applications.

3 ADMINISTRATION OF OATHS

4 SEC. 369. Medical officers of the United States, when  
5 performing duties as quarantine officers at any port or place  
6 within the United States, are authorized to take declarations  
7 and administer oaths in matters pertaining to the administra-  
8 tion of the quarantine laws and regulations of the United  
9 States.

10 TITLE IV—NATIONAL CANCER INSTITUTE

11 TO BE A DIVISION IN NATIONAL INSTITUTE OF HEALTH

12 SEC. 401. The National Cancer Institute shall be a  
13 division in the National Institute of Health.

14 CANCER RESEARCH, AND SO FORTH

15 SEC. 402. In carrying out the purposes of section 301  
16 with respect to cancer the Surgeon General, through the  
17 National Cancer Institute and in cooperation with the Na-  
18 tional Cancer Advisory Council, shall—

19 (a) conduct, assist, and foster researches, investi-  
20 gations, experiments, and studies relating to the cause,  
21 prevention, and methods of diagnosis and treatment of  
22 cancer;

23 (b) promote the coordination of researches con-  
24 ducted by the Institute and similar researches conducted  
25 by other agencies, organizations, and individuals;

1 (c) provide training and instruction in technical  
2 matters relating to the diagnosis and treatment of cancer;

3 (d) provide fellowships in the Institute from funds  
4 appropriated or donated for such purpose;

5 (e) secure for the Institute consultation services and  
6 advice of cancer experts from the United States and  
7 abroad;

8 (f) cooperate with State health agencies in the  
9 prevention, control, and eradication of cancer;

10 (g) procure, use, and lend radium as provided in  
11 section 403.

12 ADMINISTRATION

13 SEC. 403. (a) In carrying out the provisions of section  
14 402 all appropriate provisions of section 301 shall be ap-  
15 plicable to the authority of the Surgeon General, and he is  
16 authorized—

17 (1) to purchase radium, from time to time, without  
18 regard to section 3709 of the Revised Statutes, to make  
19 such radium available for the purposes of this title, both  
20 to the Service and by loan to other agencies and institu-  
21 tions for such consideration and subject to such condi-  
22 tions as he may prescribe;

23 (2) to provide the necessary facilities where train-  
24 ing and instruction may be given in all technical matters  
25 relating to diagnosis and treatment of cancer to persons

1 found by the Surgeon General to have proper technical  
2 qualifications, and designated by him for such training  
3 or instruction, and to fix and pay them a per diem allow-  
4 ance during such training or instruction of not to exceed  
5 \$10.

6 (b) The Surgeon General shall recommend acceptance  
7 of conditional gifts pursuant to section 501 of this Act, for  
8 study, investigation, or research into the cause, prevention,  
9 and methods of diagnosis and treatment of cancer, or for the  
10 acquisition of grounds or for the erection, equipment, or main-  
11 tenance of premises, buildings, or equipment of the Institute,  
12 only after consultation with the National Cancer Advisory  
13 Council. Donations of \$50,000 or over in aid of research  
14 under this title may be acknowledged by the establishment  
15 within the Institute of suitable memorials to the donors.

16 (c) In carrying out the purposes of section 402 grants-  
17 in-aid for cancer projects shall be made only after review and  
18 recommendation of the National Cancer Advisory Council  
19 made pursuant to section 404.

#### 20 FUNCTIONS OF COUNCIL

21 SEC. 404. The council is authorized—

22 (a) to review research projects or programs sub-  
23 mitted to or initiated by it relating to the study of the  
24 cause, prevention, or methods of diagnosis and treatment  
25 of cancer, and certify approval to the Surgeon General,



1       for prosecution under section 402, of any such projects  
2       which it believes show promise of making valuable con-  
3       tributions to human knowledge with respect to the cause,  
4       prevention, or methods of diagnosis and treatment of  
5       cancer;

6           (b) to collect information as to studies which are  
7       being carried on in the United States or any other  
8       country as to the cause, prevention, and methods of  
9       diagnosis and treatment of cancer, by correspondence  
10      or by personal investigation of such studies, and with the  
11      approval of the Surgeon General make available such  
12      information through the appropriate publications for the  
13      benefit of health agencies and organizations (public or  
14      private), physicians, or any other scientists, and for  
15      the information of the general public;

16          (c) to review applications from any university,  
17      hospital, laboratory, or other institution whether public  
18      or private, or from individuals, for grants-in-aid for  
19      research projects relating to cancer, and certify to the  
20      Surgeon General its approval of grants-in-aid in the  
21      cases of such projects which show promise of making  
22      valuable contributions to human knowledge with respect  
23      to the cause, prevention, or methods of diagnosis or  
24      treatment of cancer;

25          (d) to recommend to the Surgeon General for

1 acceptance conditional gifts pursuant to section 501 of  
2 this Act; and

3 (e) to make recommendations to the Surgeon Gen-  
4 eral with respect to carrying out the provisions of this  
5 title.

#### 6 APPROPRIATIONS

7 SEC. 405. Appropriations to carry out the purposes of  
8 this title shall be available for the acquisition of land or the  
9 erection of buildings only if so specified, but in the absence  
10 of express limitation therein may be expended in the Dis-  
11 trict of Columbia for personal services, stenographic recording  
12 and translating services, by contract if deemed necessary,  
13 without regard to section 3709 of the Revised Statutes;  
14 traveling expenses (including the expenses of attendance at  
15 meetings when specifically authorized by the Surgeon Gen-  
16 eral) ; rental, supplies and equipment, purchase and exchange  
17 of medical books, books of reference, directories, periodicals,  
18 newspapers, and press clippings; purchase, operation, and  
19 maintenance of motor-propelled passenger-carrying vehicles;  
20 printing and binding (in addition to that otherwise provided  
21 by law) ; and for all other necessary expenses in carrying out  
22 the provisions of this title.

#### 23 OTHER WORK WITH RESPECT TO CANCER

24 SEC. 406. This title shall not be construed as limiting  
25 (1) the functions or authority of the Surgeon General or the

1 Public Health Service under any other title of this Act, or  
2 of any other officer or agency of the United States, relating  
3 to the study of the prevention, diagnosis, and treatment of  
4 cancer; or (2) the expenditure of money therefor.

## 5 TITLE V—MISCELLANEOUS

### 6 GIFTS

7 SEC. 501. (a) The Administrator is authorized to ac-  
8 cept on behalf of the United States gifts made uncondi-  
9 tionally by will or otherwise for the benefit of the  
10 Service or for the carrying out of any of its functions. Con-  
11 ditional gifts may be so accepted if recommended by the  
12 Surgeon General, and the principal of and income from any  
13 such conditional gift shall be held, invested, reinvested, and  
14 used in accordance with its conditions, but no gift shall be  
15 accepted which is conditioned upon any expenditure not to be  
16 met therefrom or from the income thereof unless such expen-  
17 diture has been approved by Act of Congress.

18 (b) Any unconditional gift of money accepted pursuant  
19 to the authority granted in subsection (a) of this section, the  
20 net proceeds from the liquidation (pursuant to subsection (c)  
21 or subsection (d) of this section) of any other property so  
22 accepted, and the proceeds of insurance on any such gift prop-  
23 erty not used for its restoration, shall be deposited in the  
24 Treasury of the United States and are hereby appropriated  
25 and shall be held in trust by the Secretary of the Treasury for



1 the benefit of the Service, and he may invest and reinvest  
2 such funds in interest-bearing obligations of the United States  
3 or in obligations guaranteed as to both principal and interest  
4 by the United States. Such gifts and the income from such  
5 investments shall be available for expenditure in the operation  
6 of the Service and the performance of its functions, subject  
7 to the same examination and audit as is provided for appro-  
8 priations made for the Service by Congress.

9 (c) The evidences of any unconditional gift of in-  
10 tangible personal property, other than money, accepted  
11 pursuant to the authority granted in subsection (a) of this  
12 section shall be deposited with the Secretary of the Treasury  
13 and he, in his discretion, may hold them, or liquidate them  
14 except that they shall be liquidated upon the request of the  
15 Administrator, whenever necessary to meet payments re-  
16 quired in the operation of the Service or the performance of  
17 its functions. The proceeds and income from any such  
18 property held by the Secretary of the Treasury shall be  
19 available for expenditure as is provided in subsection (b)  
20 of this section.

21 (d) The Administrator shall hold any real property or  
22 any tangible personal property accepted unconditionally pur-  
23 suant to the authority granted in subsection (a) of this sec-  
24 tion and he shall permit such property to be used for the  
25 operation of the Service and the performance of its functions

1 or he may lease or hire such property, and may insure such  
2 property, and deposit the income thereof with the Secretary  
3 of the Treasury to be available for expenditure as provided in  
4 subsection (b) of this section: *Provided*, That the income  
5 from any such real property or tangible personal property  
6 shall be available for expenditure in the discretion of the  
7 Administrator for the maintenance, preservation, or repair  
8 and insurance of such property and that any proceeds from  
9 insurance may be used to restore the property insured. Any  
10 such property when not required for the operation of the  
11 Service or the performance of its functions may be liquidated  
12 by the Administrator, and the proceeds thereof deposited  
13 with the Secretary of the Treasury, whenever in his judgment  
14 the purposes of the gifts will be served thereby.

15           USE OF IMMIGRATION STATION HOSPITALS

16       SEC. 502. The Immigration and Naturalization Service  
17 may, by agreement of the heads of the departments con-  
18 cerned, permit the Public Health Service to use hospitals at  
19 immigration stations for the care of Public Health Service  
20 patients. The Surgeon General shall reimburse the Immi-  
21 gration and Naturalization Service for the actual cost of  
22 furnishing fuel, light, water, telephone, and similar supplies  
23 and services, which reimbursement shall be covered into  
24 the proper Immigration and Naturalization Service appro-

1 priation, or such costs may be paid from working funds  
2 established as provided by law, but no charge shall be  
3 made for the expense of physical upkeep of the hospitals.  
4 The Immigration and Naturalization Service shall reim-  
5 burse the Surgeon General for the care and treatment of  
6 persons detained in hospitals of the Public Health Service  
7 at the request of the Immigration and Naturalization Service  
8 unless such persons are entitled to care and treatment under  
9 section 322 (a).

10 MONEY COLLECTED FOR CARE OF PATIENTS

11 SEC. 503. Money collected as provided by law for ex-  
12 penses incurred in the care and treatment of foreign seamen,  
13 and money received for the care and treatment of pay pa-  
14 tients, including any amounts received from any executive  
15 department on account of care and treatment of pay patients,  
16 shall be covered into the appropriation from which the  
17 expenses of such care and treatment were paid.

18 CARE OF PUBLIC HEALTH SERVICE PATIENTS AT SAINT  
19 ELIZABETHS HOSPITAL

20 SEC. 504. Insane patients entitled to treatment by the  
21 Service shall be admitted, upon order of the Administrator,  
22 into Saint Elizabeths Hospital or, upon order of the Surgeon  
23 General, into any hospital, institution, or station of the Serv-  
24 ice especially equipped for the accommodation of such pa-



1 tients and shall be cared for and treated therein until cured  
2 or until ordered removed by the officer authorizing such  
3 admittance.

#### 4 SETTLEMENT OF CLAIMS

5 SEC. 505. The Administrator may consider, ascertain,  
6 adjust, and determine any claim which shall accrue, on ac-  
7 count of damages occasioned by collisions or incident to the  
8 operation of vessels of the Service, and for which damages  
9 such vessels are found by him to be responsible. To be con-  
10 sidered for settlement under this section, claims must be  
11 presented to the Administrator within one year of their  
12 accrual. The amount ascertained and determined to be due  
13 any claimant, not exceeding \$3,000 in any one case, shall be  
14 certified to Congress as a legal claim for payment out of  
15 appropriations that may be made therefor by Congress, to-  
16 gether with a brief statement of the character of each claim,  
17 the amount claimed, and the amount allowed. Acceptance  
18 by any claimant of the amount determined to be due under  
19 this section shall be deemed to be in full and final settlement  
20 of such claim against the Government of the United States.

#### 21 - TRANSPORTATION OF REMAINS OF OFFICERS

22 SEC. 506. Appropriations available for traveling ex-  
23 penses of the Service shall be available for meeting the cost of  
24 preparation for burial and of transportation to the place of

1 burial of remains of commissioned officers, and of personnel  
2 specified in regulations, who die in line of duty.

3 SETTLEMENT OF ACCOUNTS OF DECEASED OFFICERS

4 SEC. 507. (a) In the settlement of the accounts of de-  
5 ceased commissioned officers where the amount due the de-  
6 cedent's estate is less than \$1,000 and no demand is presented  
7 by a duly appointed representative of the estate, the account-  
8 ing officers may allow the amount found due to the decedent's  
9 widow or legal heirs in the following order of precedence:  
10 First, to the widow; second, if the decedent left no widow,  
11 or the widow be dead at time of settlement, then to the chil-  
12 dren or their issue, per stirpes; third, if no widow or children  
13 or their issue, then to the father and mother in equal parts,  
14 provided the father has not abandoned the support of his  
15 family, in which case to the mother alone; fourth, if either  
16 the father or mother be dead, then to the one surviving;  
17 fifth, if there be no widow, child, father, or mother at the  
18 date of settlement, then to the brothers and sisters and chil-  
19 dren of deceased brothers and sisters, per stirpes.

20 (b) Subsection (a) shall not be construed so as to pre-  
21 vent payment of funeral expenses from the amount due the de-  
22 cedent's estate if a claim therefor is presented, before settle-  
23 ment by the accounting officers, by the person or persons who  
24 actually paid such expenses.

## TRANSFER OF FUNDS

2        SEC. 508. For the purpose of any reorganization under  
3        section 202, the Administrator, with the approval of the  
4        Director of the Bureau of the Budget, is authorized to  
5        make such transfers of funds between appropriations as may  
6        be necessary for the continuance of transferred functions.

## 7 AVAILABILITY OF APPROPRIATIONS

8        SEC. 509. Appropriations for carrying out the pro-  
9        visions of section 301 shall be available for expenditure for  
10       personal services and rent at the seat of Government, for  
11       books of reference, periodicals, and exhibits, and for print-  
12       ing and binding.

13 UNAUTHORIZED WEARING OF UNIFORMS

14 SEC. 510. Except as may be authorized by regulations  
15 of the President, the insignia and uniform of commissioned  
16 officers of the Service, or any distinctive part of such insignia  
17 or uniform, or any insignia or uniform any part of which is  
18 similar to a distinctive part thereof, shall not be worn, after  
19 the promulgation of such regulations, by any person other  
20 than a commissioned officer of the Service, and any person  
21 violating this section shall be subject to the penalties provided  
22 by the Act of June 3, 1916, as amended (U. S. C., 1940  
23 edition, title 10, sec. 1393), in the case of unlawful wearing  
24 of the uniform of commissioned officers of the Army.



## ANNUAL REPORT

SEC. 511. The Surgeon General shall transmit to the Administrator, for submission to the Congress at the beginning of each regular session, a full report of the administration of the functions of the Service under this Act, including a detailed statement of receipts and disbursements.

TITLE VI—TEMPORARY AND EMERGENCY PROVISIONS AND AMENDMENTS AND REPEALS

EXISTING POSITIONS, PROCEDURES, AND SO FORTH

SEC. 601. (a) The provisions of this Act shall not affect the term or tenure of office or employment of the Surgeon General, or of any officer or employee of the Service, or of any member of the National Advisory Health Council or the National Advisory Cancer Council, in office or employed at the time of its enactment.

(b) Notwithstanding the provisions of this Act, existing positions, divisions, committees, and procedures in the Service shall continue unless and until abolished, changed, or transferred pursuant to authority granted in this Act.

EXISTING REGULATIONS, AND SO FORTH

SEC. 602. Notwithstanding the provisions of this Act, existing rules, regulations of or applicable to the Service, and Executive orders, shall remain in effect until repealed, or until modified or superseded by regulations made in accordance with the provisions of this Act.

## 1 FUNDS, APPROPRIATIONS, AND PROPERTY

2 SEC. 603. All appropriations, allocations, and other  
3 funds, and all properties available for use by the Public  
4 Health Service or any division or unit thereof shall con-  
5 tinue to be available to the Service.

## 6 APPROPRIATIONS FOR EMERGENCY HEALTH AND

## 7 SANITATION ACTIVITIES

8 SEC. 604. For each fiscal year during the continuance of  
9 the present war and during any period of demobilization after  
10 the war, there is hereby authorized to be appropriated such  
11 sum as may be necessary to enable the Surgeon General,  
12 either directly or through State health authorities, to conduct  
13 health and sanitation activities in areas adjoining military  
14 or naval reservations within or without the United States,  
15 in areas where there are concentrations of military or naval  
16 forces, in Government and private industrial plants engaged  
17 in defense work, and in areas adjoining such industrial plants.

## 18 EMPLOYEES' COMPENSATION

19 SEC. 605. (a) Section 7 of the Act of September 7,  
20 1916, entitled "An Act to provide compensation for employ-  
21 ees of the United States suffering injuries while in the per-  
22 formance of their duties, and for other purposes", as amended  
23 (U. S. C., 1940 edition, title 5, sec. 757), is amended by  
24 changing the period at the end thereof to a colon and adding  
25 the following: "*Provided*, That whenever any person is en-

1 titled to receive any benefits under this Act by reason of his  
2 injury, or by reason of the death of an employee, as defined  
3 in section 40, and is also entitled to receive from the United  
4 States any payments or benefits (other than the proceeds of  
5 any insurance policy), by reason of such injury or death under  
6 any other Act of Congress, because of service by him (or in  
7 the case of death, by the deceased) as an employee, as so  
8 defined, such person shall elect which benefits he shall re-  
9 ceive. Such election shall be made within one year after the  
10 injury or death, or such further time as the Commission may  
11 for good cause allow, and when made shall be irrevocable  
12 unless otherwise provided by law.”

13 (b) The definition of the term “employee” in section  
14 40 of such Act of September 7, 1916, as amended (U. S. C.,  
15 1940 edition, title 5, sec. 790), is amended to read as  
16 follows:

17 “The term ‘employee’ includes all civil employees of the  
18 United States and of the Panama Railroad Company, com-  
19 missioned officers of the Regular Corps of the Public Health  
20 Service, officers in the Reserve of the Public Health Service  
21 on active duty, and all persons, other than independent con-  
22 tractors and their employees, employed on the Menominee  
23 Indian Reservation in the State of Wisconsin, subsequent to  
24 September 7, 1916, in operations conducted pursuant to the  
25 Act entitled ‘An Act to authorize the cutting of timber, the



1 manufacture and sale of lumber, and the preservation of the  
2 forests on the Menominee Indian Reservation in the State of  
3 Wisconsin,' approved March 28, 1908, as amended, or any  
4 other Act relating to tribal timber and logging operations on  
5 the Menominee Reservation."

6 (c) In the case of injury or death of a commissioned  
7 officer of the Service occurring after November 10, 1943,  
8 and on or before the date of the termination of the present  
9 war, the election required by section 7 of such Act of Sep-  
10 tember 7, 1916, as amended (U. S. C., 1940 edition, title  
11 5, sec. 757), may be made, and the notice required by  
12 section 15 thereof and the written claim required by section  
13 18 thereof may be filed, within such time as may be  
14 provided by regulations of the United States Employees'  
15 Compensation Commission, but not later than the expiration  
16 of one year following the termination of the present war.  
17 Prior to the expiration of such year any such election may  
18 be revised, and such revision shall operate retroactively  
19 to the date of death or injury, but there shall be deducted  
20 from the compensation or other benefit payable pursuant  
21 to a revised election any sum (except the proceeds of any  
22 insurance policy) theretofore paid on account of such  
23 death or injury.

24 (d) In the case of death of a commissioned officer  
25 of the Service which occurred after December 7, 1941,

1 and prior to November 11, 1943, the rights provided to  
2 surviving beneficiaries by section 10 of the Public Health  
3 Service Act of 1943 shall continue notwithstanding the  
4 repeal of that Act. Such beneficiaries, in addition to the  
5 right to receive six months' pay, shall have the same right  
6 of election and of revising elections as is provided by sub-  
7 section (c) of this section, except that in case of a revised  
8 election no deduction shall be made on account of such six  
9 months' pay.

10 COMPUTATION OF RETIRED PAY IN CERTAIN CASES

11 SEC. 606. In the case of commissioned officers of the  
12 Service appointed prior to the enactment of this Act, there  
13 shall be included, in determining retired pay pursuant to  
14 section 211 (c) (1), noncommissioned service in the Public  
15 Health Service, as well as all commissioned service.

16 ALLOWANCES FOR UNIFORMS TO CERTAIN COMMISSIONED  
17 PERSONNEL

18 SEC. 607. Each commissioned officer of the Service who  
19 was appointed to the Regular Corps or called to active duty  
20 in the Reserve Corps since December 7, 1941, and prior to  
21 the enactment of this Act, and who on or after November  
22 11, 1943, was on active duty in the grade of junior assistant,  
23 assistant, or passed assistant and was receiving the pay of the  
24 first, second, or third pay period, shall be entitled to receive  
25 an allowance of \$250 for uniforms and equipment.

1 PATIENTS OF SAINT ELIZABETHS HOSPITAL IN PUBLIC  
2 HEALTH SERVICE HOSPITALS

3 SEC. 608. Insane patients entitled to treatment in Saint  
4 Elizabeths Hospital who may heretofore or hereafter, during  
5 the continuance of the present war, or during the period of  
6 six months thereafter, have been admitted to hospitals of the  
7 Service, may continue to be cared for and treated in such  
8 hospitals notwithstanding the termination of such period.

9 ELIGIBILITY OF OSTEOPATHS TO APPOINTMENT IN THE  
10 RESERVE CORPS

11 SEC. 609. For the duration of the present war and for  
12 six months thereafter graduates of reputable osteopathic col-  
13 leges shall be eligible for appointment as reserve officers in  
14 the Service.

15 TEMPORARY PROVISIONS RESPECTING MEDICAL AND  
16 HOSPITAL BENEFITS

17 SEC. 610. (a) Subject to regulations of the President,  
18 members of the Women's Reserve of the Coast Guard, or  
19 their dependents, shall be entitled to the benefits provided  
20 by section 326 for male officers and enlisted men of the  
21 Coast Guard or their dependents: *Provided*, That the hus-  
22 bands of such members shall not be considered dependents,  
23 and the children of such members shall not be considered  
24 dependents unless their father is dead or they are in fact  
25 dependent on their mother for their chief support.



1       (b) Subject to regulations of the President, lightkeepers  
 2 and assistant lightkeepers (who during their active service  
 3 were entitled to medical relief at hospitals and other sta-  
 4 tions of the Public Health Service), and officers and crews  
 5 of vessels of the former Lighthouse Service, who have been  
 6 or who may hereafter be retired under the provisions of  
 7 section 6 of the Act of June 20, 1918, as amended (U. S. C.,  
 8 1940 edition, title 33, sec. 763), shall be entitled to medical,  
 9 surgical, and dental treatment and hospitalization by the  
 10 Public Health Service.

#### 11                               REPEAL OF EXISTING LAW

12       SEC. 611. The following statutes or parts of statutes  
 13 are hereby repealed:

14       Section 3689 in title XLI, and sections 4801, 4802,  
 15 4803, 4804, 4805, and 4806 in title LIX of the Revised  
 16 Statutes of the United States;

17       The last paragraph under the heading "Miscellaneous"  
 18 in chapter 130, 18 Statutes at Large 371, which paragraph  
 19 is the seventh beginning on page 377;

20       Chapter 156, 18 Statutes at Large 485;

21       Chapter 66, 20 Statutes at Large 37;

22       Chapter 202, 20 Statutes at Large 484;

23       Chapter 61, 21 Statutes at Large 46;

24       Section 1, and the final clause of section 2 (which reads  
 25 as follows: "and the said quarantine stations when so estab-

lished shall be conducted by the Marine Hospital Service under regulations framed in accordance with the Act of April twenty-ninth, eighteen hundred and seventy-eight"), of chapter 727, 25 Statutes at Large 355;

Chapter 19, 25 Statutes at Large 639;

Chapter 51, 26 Statutes at Large 31;

The last sentence of the paragraph headed "Office of the Supervising Surgeon General, Marine Hospital Service" in chapter 541, 26 Statutes at Large 908, which appears at page 923 and reads as follows: "And hereafter, the Supervising Surgeon General is hereby authorized to cause the detail of two surgeons and two passed assistant surgeons for duty in the Bureau, who shall each receive the pay and allowances of their respective grades in the general service.";

Chapter 114, 27 Statutes at Large 449;

The last sentence of the paragraph headed "Office of Supervising Surgeon General, Marine Hospital Service", in chapter 174, 28 Statutes at Large 162, which appears at page 179 and which reads as follows: "And hereafter the Supervising Surgeon General of the Marine Hospital Service is hereby authorized to cause the detail of an additional medical officer and one hospital steward for duty in the Bureau, who shall each receive the pay and allowances of his respective grade in the general service.";

Chapter 213, 28 Statutes at Large 229;

1 Chapter 300, 28 Statutes at Large 372;

2 The last sentence of the paragraph headed "Office of  
3 Supervising Surgeon General, Marine Hospital Service", in  
4 chapter 177, 28 Statutes at Large 764, which appears at  
5 page 780 and which reads as follows: "And hereafter the  
6 Supervising Surgeon General of the Marine Hospital Service  
7 is hereby authorized to cause the detail of two hospital at-  
8 tendants from the port of New York for duty in the labora-  
9 tory of the Bureau, and who shall each receive the pay  
10 equivalent to the compensation of a first-class hospital  
11 attendant.";

12 The proviso at the end of the paragraph headed "Office  
13 of Supervising Surgeon-General Marine-Hospital Service" in  
14 chapter 265, 29 Statutes at Large 538, which appears at  
15 page 554 and which reads as follows: "*Provided*, That the  
16 Secretary of the Treasury is hereby authorized, in his discre-  
17 tion, to grant to the medical officers of the Marine-Hospital  
18 Service commissioned by the President, without deduction  
19 of pay, leaves of absence for the same period of time and in  
20 the same manner as is now authorized to be granted to  
21 officers of the Army by the Secretary of War";

22 Chapter 349, 30 Statutes at Large 976;

23 Section 10, chapter 191, 31 Statutes at Large 77, at  
24 page 80;



1       The first paragraph of section 97 of chapter 339, 31  
2 Statutes at Large 141;

3       Chapter 836, 31 Statutes at Large 1086;

4       That portion of the third paragraph of section 84 of  
5 chapter 1369, 32 Statutes at Large 691, which appears at  
6 page 711 and which reads as follows: "and the provisions  
7 of law relating to the public health and quarantine shall  
8 apply in the case of all vessels entering a port of the United  
9 States or its aforesaid possessions from said islands, where  
10 the customs officers at the port of departure shall perform  
11 the duties required by such law of consular officers in  
12 foreign ports";

13       Chapter 1370, 32 Statutes at Large 712;

14       Chapter 1378, 32 Statutes at Large 728;

15       Chapter 1443, 33 Statutes at Large 1009;

16       The last sentence of the last paragraph under the heading  
17 "Public Health and Marine Hospital Service" in chapter  
18 1484, 33 Statutes at Large 1214, which appears at page  
19 1217 and which reads as follows: "And the Secretary of the  
20 Treasury shall, for the fiscal year nineteen hundred and seven,  
21 and annually thereafter, submit to Congress, in the regular  
22 Book of Estimates, detailed estimates of the expenses of  
23 maintaining the Public Health and Marine Hospital  
24 Service,";

1       Public Resolution Numbered 21, 33 Statutes at Large  
2 1283;

3       Chapter 3433, 34 Statutes at Large 299;

4       Section 17 of chapter 1134, 34 Statutes at Large 898,  
5 at page 903;

6       That portion of the third paragraph under the heading  
7 “Back Pay and Bounty” in chapter 200, 35 Statutes at Large  
8 373, as amended by chapter 213, 52 Statutes at Large 352,  
9 which is at page 352 of 52 Statutes at Large and which reads  
10 as follows: “and of deceased commissioned officers of the  
11 Public Health Service”;

12       The proviso in the tenth paragraph under the heading  
13 “Public Health and Marine Hospital Service” in chapter  
14 285, 36 Statutes at Large 1363, which appears in the eighth  
15 paragraph on page 1394 and which reads as follows: “*Pro-*  
16 *vided*, That there may be admitted into said hospitals, for  
17 study, persons with infectious or other diseases affecting  
18 the public health, and not to exceed ten cases in any one  
19 hospital at one time”, and the substantially similar pro-  
20 visions appearing under the heading “Public Health and  
21 Marine Hospital Service” or the heading “Public Health  
22 Service” in the following statutes: Chapter 355, 37 Statutes  
23 at Large 417, at page 435; chapter 3, 38 Statutes at  
24 Large 4, at page 24; chapter 209, 39 Statutes at Large  
25 262, at page 278; chapter 28, 40 Statutes at Large 459,

1 at page 468; chapter 113, 40 Statutes at Large 634, at  
2 page 644; chapter 24, 41 Statutes at Large 163, at page  
3 175;

4 Chapter 288, 37 Statutes at Large 309;

5 The proviso at the end of the last paragraph under the  
6 heading "Public Health Service" in chapter 149, 37 Statutes  
7 at Large 912, which appears at page 915 and which reads  
8 as follows: "*Provided*, That hereafter the director of the  
9 Hygienic Laboratory shall receive the pay and allowances  
10 of a senior surgeon";

11 That portion of the second paragraph under the heading  
12 "Public Health Service" in chapter 3, 38 Statutes at Large  
13 4, which appears at page 23 and which reads as follows:  
14 "at least six of the assistant surgeons provided for hereunder  
15 shall be required to have had a special training in the  
16 diagnosis of insanity and mental defect for duty in connec-  
17 tion with the examination of arriving aliens with special  
18 reference to the detection of mental defection;";

19 The proviso at the end of the twelfth paragraph under  
20 the heading "Public Health Service" in chapter 3, 38 Stat-  
21 utes at Large 4, which appears at page 24 and which reads as  
22 follows: "*Provided*, That hereafter commissioned officers and  
23 pharmacists, and those employees of the Service devoting all  
24 their time to field work, shall be entitled to hospital relief  
25 when taken sick or injured in line of duty";



1       The last clause of chapter 124, 38 Statutes at Large 387,  
2   which reads as follows: “and the said Secretary is hereby  
3   authorized to detail for duty on revenue cutters such sur-  
4   geons and other persons of the Public Health Service as he  
5   may deem necessary”;

6       Section 5 of chapter 414, 39 Statutes at Large 536, at  
7   page 538;

8       Chapter 26, 39 Statutes at Large 872;

9       That portion of section 16 of chapter 29, 39 Statutes at  
10   Large 874, which appears at page 885 and which reads as  
11   follows: “who shall have had at least two years’ experience  
12   in the practice of their profession since receiving the degree  
13   of doctor of medicine, and”;

14       The sixth paragraph under the heading “Public Health  
15   Service” in chapter 3, 40 Statutes at Large 2, at page 6;

16       The seventh paragraph under the heading “Bureau of  
17   Mines” in chapter 27, 40 Statutes at Large 105, which is  
18   the third full paragraph appearing on page 146;

19       Chapter 37, 40 Statutes at Large 242;

20       The proviso in the fourth paragraph under the heading  
21   “Public Health Service” in chapter 113, 40 Statutes at  
22   Large 634, which appears at page 644 and which reads as  
23   follows: “*Provided*, That the pay of attendants at marine  
24   hospitals, quarantine, and immigration stations, whose pres-  
25   ent compensation is less than the rate of \$1,200 per annum,

1 may be increased to, a rate not to exceed \$1,200 per  
2 annum”;

3       The proviso in the eleventh paragraph under the head-  
4 ing “Public Health Service” in chapter 113, 40 Statutes at  
5 Large 634, which appears at page 644 and which reads as  
6 follows: “*Provided*, That the Public Health Service, from  
7 and after July first, nineteen hundred and eighteen, shall  
8 pay to Saint Elizabeths Hospital the actual per capita cost of  
9 maintenance in the said hospital of patients committed by  
10 that Service”;

11       The sixtieth paragraph under the heading “Bureau of  
12 Fisheries” in chapter 113, 40 Statutes at Large 634, which  
13 is the fourth full paragraph appearing on page 694;

14       Sections 1, 3, 4, 6, and 7 of chapter XV of chapter 143,  
15 40 Statutes at Large 845, at page 886;

16       The thirteenth paragraph under the heading “General  
17 Expenses, Bureau of Chemistry” in chapter 178, 40 Statutes  
18 at Large 973, which is the second full paragraph appearing  
19 on page 992;

20       Section 2 of chapter 179, 40 Statutes at Large 1008;

21       Chapter 196, 40 Statutes at Large 1017;

22       Chapter 98, 40 Statutes at Large 1302;

23       The last paragraph under the heading “Public Health  
24 Service” in chapter 6, 41 Statutes at Large 35, which is the  
25 sixth full paragraph appearing on page 45;

1       The proviso at the end of the first paragraph under the  
2 heading "Public Health Service" in chapter 94, 41 Statutes  
3 at Large 503, which appears at page 507, and which reads  
4 as follows: "*Provided*, That the Secretary of the Treasury  
5 is authorized to make regulations governing the disposal of  
6 articles produced by patients in the course of their curative  
7 treatment, either by allowing the patient to retain same or  
8 by selling the articles and depositing the money received to  
9 the credit of the appropriation from which the materials for  
10 making the articles were purchased";

11       The second paragraph under the heading "Public Health  
12 Service" in chapter 94, 41 Statutes at Large 503, which is  
13 the seventh full paragraph appearing on page 507;

14       The last paragraph under the heading "Public Health  
15 Service" in chapter 94, 41 Statutes at Large 503, which is  
16 the seventh full paragraph appearing on page 508, and the  
17 substantially similar provisions in chapter 161, 41 Statutes  
18 at Large 1367, at page 1378;

19       The fourth paragraph under the heading "Quarantine  
20 Stations" in chapter 235, 41 Statutes at Large 874, which is  
21 the eighth full paragraph appearing on page 875;

22       The third paragraph under the heading "Public Health  
23 Service" in chapter 235, 41 Statutes at Large 874, which  
24 is the ninth full paragraph appearing on page 883;

25       Chapter 80, 41 Statutes at Large 1149;



1       The second paragraph under the heading "Public Health  
2 Service" in chapter 23, 42 Statutes at Large 29, which is  
3 the thirteenth full paragraph appearing on page 38;

4       The proviso at the end of section 4 of chapter 57, 42  
5 Statutes at Large 147, which appears at page 148, and which  
6 reads as follows: "*Provided*, That all commissioned personnel  
7 detailed or hereafter detailed from the United States Public  
8 Health Service to the Veterans' Bureau, shall hold the same  
9 rank and grade, shall receive the same pay and allowances,  
10 and shall be subject to the same rules for relative rank and  
11 promotion as now or hereafter may be provided by law for  
12 commissioned personnel of the same rank or grade or per-  
13 forming the same or similar duties in the United States Pub-  
14 lic Health Service";

15       The ninth paragraph under the heading "Bureau of  
16 Mines", in chapter 199, 42 Statutes at Large 552, which is  
17 the fourth full paragraph on page 588, and the substantially  
18 similar provisions in chapter 42, 42 Statutes at Large 1174,  
19 at page 1210; chapter 264, 43 Statutes at Large 390, at  
20 page 422; chapter 462, 43 Statutes at Large 1141, at page  
21 1175;

22       The last sentence of the paragraph under the heading  
23 "Public Health Service" in chapter 258, 42 Statutes at Large  
24 767, which appears at page 776 and which reads as follows:  
25 "The Immigration Service shall reimburse the Public Health

1 Service on the basis of per capita rates fixed by the Secre-  
2 tary of the Treasury and the sums received by the Public  
3 Health Service from this source shall be covered into the  
4 Treasury as miscellaneous receipts”;

5       The first proviso at the end of the ninth paragraph under  
6 the heading “Public Health Service” in chapter 84, 43  
7 Statutes at Large 64, which appears at page 75 and which  
8 reads as follows: “*Provided*, That the Immigration Service  
9 shall permit the Public Health Service to use the hospitals  
10 at Ellis Island Immigration Station for the care of the  
11 Public Health Service patients, free of expense for physi-  
12 cal upkeep, but with a charge of actual cost for fuel, light,  
13 water, telephone, and similar supplies and services, to be  
14 covered into the proper Immigration Service appropria-  
15 tions; and moneys collected by the Immigration Service  
16 on account of hospital expenses of persons detained under  
17 the immigration laws and regulations at Ellis Island Immi-  
18 gration Station shall be covered into the Treasury as  
19 miscellaneous receipts.”,

20 and substantially similar provisions under the heading “Public  
21 Health Service” in chapter 87, 43 Statutes at Large 763,  
22 at page 775; chapter 43, 44 Statutes at Large 136, at  
23 page 147; chapter 126, 45 Statutes at Large 162, at page  
24 174; chapter 39, 45 Statutes at Large 1028, at page 1039;  
25 chapter 289, 46 Statutes at Large 335, at page 347; chapter

1 110, 49 Statutes at Large 218, at page 229; chapter 725,  
 2 49 Statutes at Large 1827, at page 1839; chapter 180, 50  
 3 Statutes at Large 137, at page 149; chapter 55, 52 Statutes  
 4 at Large 120, at page 133; chapter 428, 54 Statutes at Large  
 5 574, at page 585; chapter 269, 55 Statutes at Large 466, at  
 6 page 481; and chapter 475, 56 Statutes at Large 562, at  
 7 page 581;

8 Chapter 146, 43 Statutes at Large 809;

9 The words "and public health" in the last sentence of  
 10 section 7 (b) of chapter 344, 44 Statutes at Large 568, at  
 11 page 572;

12 The words "or public-health" wherever they appear in  
 13 the second sentence of section 11 (b) of chapter 344, 44  
 14 Statutes at Large 568, at page 574, as amended;

15 Section 3 of chapter 371, 44 Statutes at Large 622, at  
 16 page 626;

17 Chapter 625, 45 Statutes at Large 603;

18 The proviso at the end of the fifth paragraph under the  
 19 heading "Public Health Service" in chapter 39, 45 Statutes  
 20 at Large 1028, which appears at page 1039, and which reads  
 21 as follows: "*Provided*, That funds expendable for transpor-  
 22 tation and traveling expenses may also be used for prepara-  
 23 tion for shipment and transportation to their former homes  
 24 of remains of officers who die in line of duty",

25 and substantially similar provisions appearing under the



1 heading "Public Health Service" in chapter 289, 46 Statutes  
 2 at Large 335, at page 346; chapter 110, 49 Statutes at Large  
 3 218, at page 228; chapter 180, 50 Statutes at Large 137, at  
 4 page 148; chapter 55, 52 Statutes at Large 120, at page 132;  
 5 chapter 428, 54 Statutes at Large 574, at page 584; chap-  
 6 ter 269, 55 Statutes at Large 466, at page 480;

7 Chapter 82, 45 Statutes at Large 1085;

8 The second paragraph under the heading "Government  
 9 in the Territories" in chapter 707, 45 Statutes at Large 1623,  
 10 which is the seventh full paragraph on page 1644;

11 So much of chapter 70, 46 Statutes at Large 81, as  
 12 reads: ", and at his discretion to permit the erection of other  
 13 buildings which may in the future be donated to promote  
 14 the welfare of patients and personnel";

15 Chapter 125, 46 Statutes at Large 150;

16 Chapter 320, 46 Statutes at Large 379;

17 Section 4 of chapter 488, 46 Statutes at Large 585;

18 Chapter 597, 46 Statutes at Large 807;

19 Chapter 409, 46 Statutes at Large 1491;

20 The words "or public health" in the last sentence of  
 21 section 2 of chapter 656, 48 Statutes at Large 1116;

22 The ninth paragraph under the heading "Public Health  
 23 Service" in chapter 110, 49 Statutes at Large 218, which is  
 24 the second full paragraph appearing on page 229;

1 Title VI of chapter 531, 49 Statutes at Large 620, at  
2 page 634;

3 Chapter 161, 49 Statutes at Large 1185;

4 That portion of chapter 550, 49 Statutes at Large 1514,  
5 which reads as follows: "or of the United States Public  
6 Health Service";

7 The proviso at the end of the thirteenth paragraph under  
8 the heading "Public Health Service" in chapter 725, 49  
9 Statutes at Large 1827, which appears at page 1840 and  
10 which reads as follows: "*Provided*, That on and after July 1,  
11 1936, the Narcotic Farm at Lexington, Kentucky, shall be  
12 known as United States Public Health Service Hospital,  
13 Lexington, Kentucky, but such change in designation shall  
14 not affect the status of any person in connection therewith  
15 or the status of such institution under any Act applicable  
16 thereto";

17 The fourth paragraph under the heading "Public Health  
18 Service" in chapter 180, 50 Statutes at Large 137, which is  
19 the sixth full paragraph on page 148;

20 Section 2 of chapter 545, 50 Statutes at Large 547;

21 Chapter 565, 50 Statutes at Large 559;

22 The first proviso in the paragraph having the subhead  
23 "Division of Mental Hygiene" under the heading "Public  
24 Health Service" in chapter 55, 52 Statutes at Large 120,  
25 which appears at page 134 and which reads as follows:

1 *“Provided, That on and after July 1, 1938, the United States*  
 2 *Narcotic Farm, Fort Worth, Texas, shall be known as*  
 3 *United States Public Health Service Hospital of Fort Worth,*  
 4 *Texas, but such change in designation shall not affect the*  
 5 *status of any person in connection therewith or the status*  
 6 *of such institution under any Act applicable thereto:”;*

7 Chapter 267, 52 Statutes at Large 439;

8 Chapter 92, 53 Statutes at Large 620;

9 Chapter 606, 53 Statutes at Large 1266;

10 Chapter 636, 53 Statutes at Large 1338;

11 Section 509 of chapter 666, 53 Statutes at Large 1360,  
 12 at page 1381;

13 Section 205 (b) of Reorganization Plan Numbered I,  
 14 53 Statutes at Large 1423, at page 1425;

15 Chapter 566, 54 Statutes at Large 747;

16 The fourth paragraph under the heading “Public Health  
 17 Service” in Public Law 11, Seventy-eighth Congress, at  
 18 page 4; and

19 Public Law 184, Seventy-eighth Congress.

20 PRESERVATION OF RIGHTS AND LIABILITIES

21 SEC. 612. The repeal of the several statutes or parts  
 22 of statutes accomplished by section 611 shall not affect any  
 23 act done, or any right accruing or accrued, or any suit or  
 24 proceeding had or commenced in any civil cause, before  
 25 such repeal, but all rights and liabilities under the statutes



1 or parts thereof so repealed shall continue, and may be  
2 enforced in the same manner, as if such repeal had not been  
3 made.

Passed the House of Representatives May 22, 1944.

Attest:

SOUTH TRIMBLE,

*Clerk.*



78TH CONGRESS  
2D Session

H. R. 4624

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## AN ACT

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To consolidate and revise the laws relating to the Public Health Service, and for other purposes.

---

MAY 23 (legislative day, MAY 9), 1944

Read twice and referred to the Committee on Commerce

JUNE 16 (legislative day, MAY 9), 1944

The Committee on Commerce discharged, and referred to the Committee on Education and Labor







**FILE COPY**

Please return to  
LEGISLATIVE REPORTS AND SERVICE SECTION  
Office of Budget and Finance

**LAWS RELATING TO THE PUBLIC HEALTH SERVICE**

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**HEARINGS**

BEFORE A

**SUBCOMMITTEE OF THE  
COMMITTEE ON EDUCATION AND LABOR  
UNITED STATES SENATE  
SEVENTY-EIGHTH CONGRESS**

SECOND SESSION

ON

**H. R. 4624**

**AN ACT TO CONSOLIDATE AND REVISE THE LAWS  
RELATING TO THE PUBLIC HEALTH SERVICE,  
AND FOR OTHER PURPOSES**

---

JUNE 19 AND 20, 1944

---

Printed for the use of the Committee on Education and Labor



UNITED STATES  
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WASHINGTON : 1944



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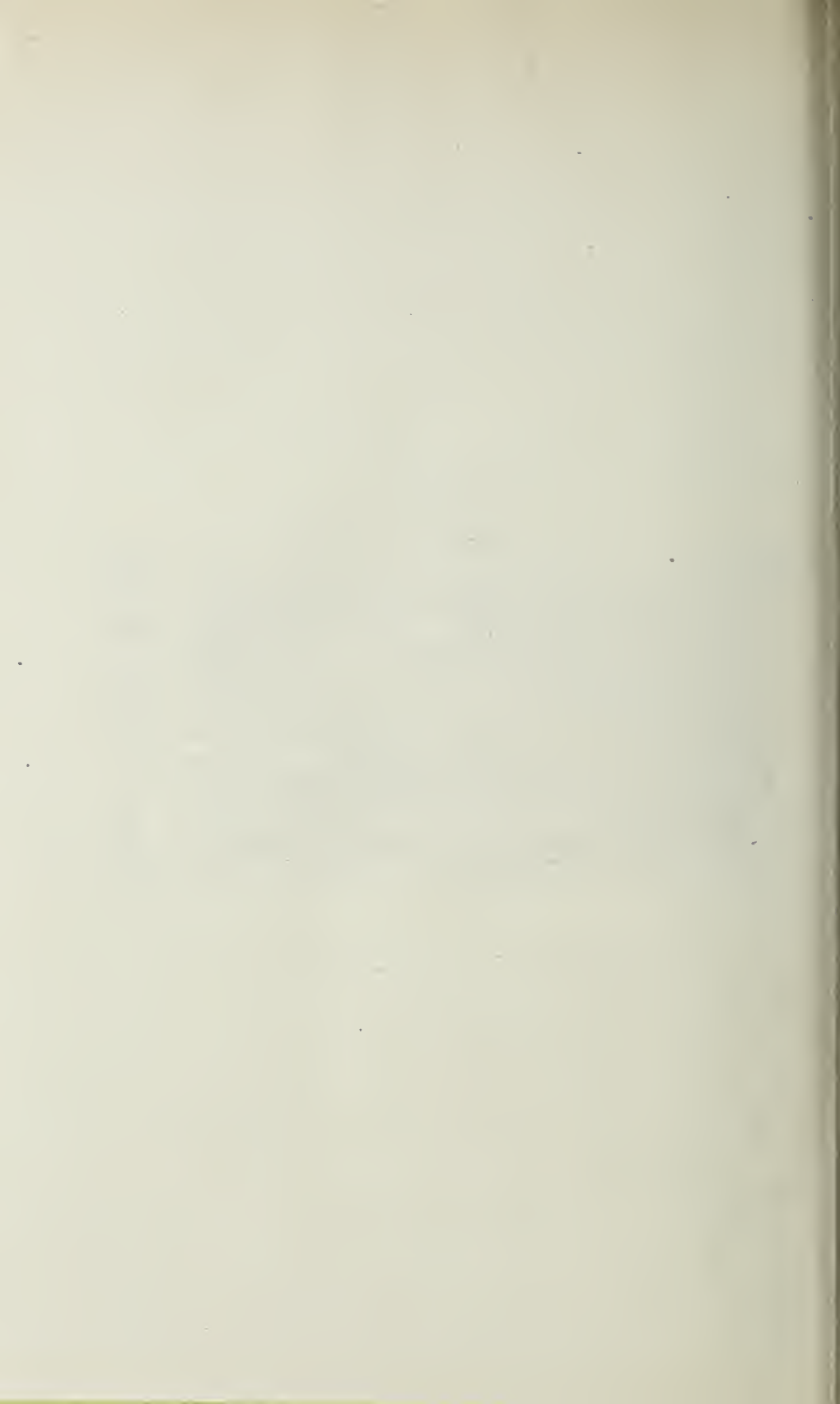
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# LAWS RELATING TO THE PUBLIC HEALTH SERVICE

MONDAY, JUNE 19, 1944

UNITED STATES SENATE,  
SUBCOMMITTEE OF THE COMMITTEE ON EDUCATION AND LABOR,  
*Washington, D. C.*

The subcommittee met, pursuant to call, at 10:30 a. m., in the committee room in the Capitol, Senator Lister Hill (chairman) presiding. Present: Senators Hill (chairman), Pepper, Weeks and Aiken.

Also present: Representative Alfred L. Bulwinkle.

Senator HILL. The subcommittee will kindly come to order.

We are meeting this morning, gentlemen, to consider H. R. 4624, a bill to consolidate and revise the laws relating to the Public Health Service, and for other purposes.

We are very glad to have with us this morning Congressman Bulwinkle, of North Carolina, who is the chairman of the subcommittee of the House Committee on Interstate and Foreign Commerce.

Hearings were had on this bill and Congressman Bulwinkle piloted the bill through the House.

We are glad to have you here this morning Congressman, and we will be glad to have you make a statement about the bill.

## STATEMENT OF HON. ALFRED L. BULWINKLE, A MEMBER OF CONGRESS FROM THE STATE OF NORTH CAROLINA

Mr. BULWINKLE. Thank you very much, Mr. Chairman.

I want to say first that Mr. Brown, of Ohio, ranking minority member on the subcommittee was to have been here too but he cannot come this morning. He said he may come in just a little late.

As you know this bill just consolidates and revises the statute as to the Public Health.

For some 40 or 50 years the Public Health has just been mushroomed up—

Senator HILL. Off the record.

(Discussion off the record.)

Mr. BULWINKLE (continuing). From appropriation bills, from general acts, until sometimes we didn't know what was the law, and especially if anything were to be introduced or was introduced.

Something like 2 years ago I called this to the attention of the Public Health Service and the Federal Security Agency, that there should be a complete revision of the public-health laws so that Congress and especially the Appropriations Committee could know what is the law.

As I said, this consolidates and revises all the usable existing law.

In the second place it repeals the obsolete existing law; third, it harmonizes and rationalizes inconsistent provisions regarding the functions of the service.

Fourth, it resolves the doubts and ambiguities in existing law.

Those are the main objectives.

After we started on this with Mr. Calhoun and Mr. Willcox of the Federal Security Agency and the Drafting Service or Legislative Counsel of the House, Mr. Perley, he went into it very carefully.

It was months—I think it was 9 months that they took to give me a report on it.

In the meantime I went over other provisions with them; Dr. Thompson and Dr. Parran sat in with them, and we brought forth the first bill which I introduced, H. R. 3379.

After extensive hearings, in order to have a clean bill we prepared amendments to this original bill, and in order to have a clean bill to introduce to the House, the bill that is before you now was reported unanimously from the subcommittee, unanimously from the full committee, and I passed it in the House by unanimous consent.

That is the legislative history of this bill that is before you.

Dr. Parran is fully in accord with what it contains, as well as Mr. Willcox and others who have gone over it.

Senator HILL. Mr. Congressman, did you put any new matter in the bill?

Mr. BULWINKLE. Very little.

Senator HILL. Very little.

Mr. BULWINKLE. There were some instances where we had to clear up ambiguities, and in which the administrative experience showed that it was necessary, but it was only minor.

Senator HILL. Yes.

Mr. BULWINKLE. There were only minor changes made in it.

Senator HILL. It was only to tie in, as it were?

Mr. BULWINKLE. Yes.

Senator HILL. Yes.

Mr. BULWINKLE. Mr. Willcox, of course, can go into it fully and show you the differences in existing law, but the hearings on this, you have, I imagine the house hearings, which are full and complete.

We took some days on it.

Senator HILL. Let me ask you this, Mr. Congressman.

You have in the House the so-called tuberculosis bill.

Mr. BULWINKLE. Yes.

Senator HILL. What is the status of that bill?

Mr. BULWINKLE. I will pass it today.

Senator HILL. You will pass it in the House today?

Mr. BULWINKLE. Yes.

Senator HILL. Then if you pass it today I take it it would be agreeable to you if we put it in this bill as an amendment.

Mr. BULWINKLE. It would be. It would be.

May I make a suggestion to you so that we can have it at the same time, that if we pass it today, then I request Mr. Perley of the Legislative Counsel to come over here to assist Mr. Willcox in drafting this with your Drafting Service, so that it can fit in.

Senator HILL. Good.

Senator AIKEN. Which is the more urgent, the tuberculosis bill or this bill?

The reason I asked was this is a big bill. We have some 20 members of our committee, and if there is any urgency about the tuberculosis bill, it seems it would be better to have that go along then it would be to tie it in with this.

There are some members of the committee who like to make a pretty thorough study of anything like this.

Senator PEPPER. On the other hand, in view of this being a non-controversial bill, Senator, I think it might go along.

Senator HILL. We are not doing anything new here, we are not passing new law. What we are doing is codifying existing law. But in some instances we are reconciling what appears to be some little conflict here or there, we are reconciling the statutes to bring them together.

Mr. BULWINKLE. May I say a word, Senator?

Senator HILL. Yes.

Mr. BULWINKLE. We do not use the word "codifying." It is very much disliked in the House and the Senate, but it is a revision in consolidation, primarily, and I think the Senate is going to do just like the House had to do, because when you repeal, if you will notice, on page 79, Senator, section 611, there are some 18 or 19 pages of repeal of existing laws, part of those on appropriation bills.

They are subject to a point of order in the House at any time, and they may be very important, but I went over this with Mr. Willcox and Mr. Perley and they checked it very thoroughly.

Senator AIKEN. You say there are no real changes in existing law?

Mr. BULWINKLE. No.

Dr. Parran and Mr. Willcox can explain to you what changes were absolutely necessary, but as far as any great changes, there were none. There were minor changes.

Senator AIKEN. I would like to say this off the record.

Senator HILL. Off the record.

(Discussion off the record.)

Senator HILL. Well, we want to thank you. It is very fine of you to come over here this morning.

Senator PEPPER. And give us the advantage of your good work.

Senator HILL. Yes, sir. We appreciate it very much.

Senator AIKEN. If there is need in it, we want the TB bill reported out.

Dr. PARRAN. We certainly want the tuberculosis bill to be enacted into law promptly.

We hope the two may go through together.

Senator HILL. Now, Dr. Parran, we would be delighted to have you make any statement you wish to make.

#### STATEMENT OF DR. THOMAS PARRAN, SURGEON GENERAL, PUBLIC HEALTH SERVICE

Dr. PARRAN. As Congressman Bulwinkle has explained, this bill is in the main a codification of existing law.

The public-health law has represented a hodgepodge of overlapping and conflicting provisions, ambiguous references, and obsolete provisions.

It should be recalled that more than a year ago this committee considered and reported and the Senate passed as S. 400 a bill by Senator Thomas, of Utah, to reorganize the Public Health Service, which on November 11, 1943, became Public Law 184.

That law gave to the Public Health Service authority and military benefits in time of war and authorized a rather sweeping administrative reorganization.

However, the terms of S. 400 were couched in very general language, and so an attempt has been made in the bill which is before you to spell out more in detail the provisions of Public Law 184.

A House committee in the meantime, in fact, since January 1943, had been considering a codification of the then existing laws of the Public Health Service, but in its attempt to codify, the very efficient House subcommittee found that the codification without some interpretation and without some extension of substantive law would produce a very poor result.

Therefore, some revision of existing law was made after exhaustive hearings.

By way of background I should like to point out that the Public Health Service has four major functions:

1. Since 1798 to give medical care to merchant seamen, Coast Guard personnel, and other legal beneficiaries, which beneficiaries have been expanded from time to time so that now they include patients with leprosy and narcotic addicts, for example.

2. To aid the States through the control of disease, in the establishing and maintaining adequate health services, in the training of personnel; in short, to prevent disease and to promote the public health by applying existing knowledge.

3. To expand through all types of research and study our knowledge of the factors which influence health and disease among our people.

4. To prevent the introduction of certain dangerous contagious diseases into the United States and its territories and their spread in interstate commerce.

To accomplish these purposes we have an organization of 15,000 persons here and abroad

The heart and center of the Public Health Service is a small regular commissioned corps of career officers, medical, dental, and sanitary engineering, some 630 strong.

Added to that there are now on active duty some sixteen hundred comparable reserves.

I should like to emphasize the fact that our organization has important tasks both in wartime and peacetime.

About one-third of our commissioned officers are serving with our military forces on every battle front.

We provide the medical service for the Coast Guard, and we have officers on loan to the Army and the Navy.

We also provide medical and dental service and sanitation to many civilian agencies of the Government.

Among others, I might cite the service in Federal prisons, the Indian medical service, the Employees Compensation service, the Office of Civilian Defense, the State Department and so on.

The result is that the Public Health Service is in fact, if not in law, the central Federal health agency.

After a study of our functions and needs in the House committee, the result is H. R. 4624 which is now before you.

Congressman Bulwinkle has emphasized that it was passed by the subcommittee and the full committee unanimously, and passed by the House.

I should like to point out the major changes in existing law which this bill contains.



The details will be found in the House Committee Report No. 1364, dated April 20, 1944.

The bill contains 94 pages, of which 21 pages deal with repeals of existing law and temporary provisions.

The principle changes and additions to present law are as follows:

1. Under title VI of the Social Security Act we are authorized to have an appropriation of \$11,000,000 for grants to States, plus \$2,000,000 for research and administration.

In this bill that is raised to \$20,000,000, \$2,000,000 of which is available for administration; in other words, a net increase of \$7,000,000 for grants to the States.

2. Grants for research to universities and scientific institutions now are authorized for the control of cancer.

That authorization has been extended to other research problems; likewise, the appointment of research fellows as now authorized for cancer has been extended to other research activities.

These two items of authority have proven so satisfactory in connection with cancer research that the House decided that it should be extended to the work of the National Institute of Health generally. This is the research arm of the Public Health Service.

3. The classes of persons eligible for appointment to the regular corps are enlarged to include scientists other than doctors, dentists and sanitary engineers.

4. Persons entitled to care in marine hospitals—in other words, legal beneficiaries under the Public Health Service—the group added are members of the U. S. Maritime Service and cadets of the maritime Service.

SENATOR HILL. Doctor, in that connection, if it won't interrupt your trend of thought—

DR. PARRAN. Not at all.

SENATOR HILL. How many hospitals do you have today?

DR. PARRAN. We have 26 marine hospitals.

SENATOR HILL. You have 26 marine hospitals. Do you have authority to establish additional hospitals? Of course you would have to have appropriations. Do you have authority to select the site?

DR. PARRAN. We do not, Mr. Chairman. That fact was called to my attention after it had been reported to the House.

It is rather interesting that for many years the Public Health Service has had authority to select sites for quarantine stations, depending upon the changing needs, and to establish research laboratories, but we have no authority in law to establish new marine hospitals unless a special bill is passed.

SENATOR HILL. A special authorization bill?

DR. PARRAN. Yes.

SENATOR HILL. Well, of course, the Veterans' Administration, for instance, does not have to come to Congress to get a special authorization bill for a hospital. Isn't that true?

DR. PARRAN. Yes.

SENATOR HILL. They have to get their money of course from Congress but they have authority under the law to go out where there is a need for a hospital, to make investigation and select a site and use the funds such as Congress may give them to construct a hospital.

Isn't that true?

Dr. PARRAN. It is.

Senator HILL. I think that is true today of the War Department.

What do you think about it, just as you would have authority to establish these laboratories or research centers, do you not think you ought to have authorization with reference to the establishment of hospitals?

Dr. PARRAN. It would be very helpful if we did, Mr. Chairman.

Our current law with reference to establishment of quarantine stations provides as follows:

With the approval of the President he shall—

meaning the Surgeon General—

from time to time select suitable sites for such stations, grounds, and so forth that are needed for quarantine purposes.

Comparable authority would be very helpful in connection with our marine hospitals.

Senator HILL. In connection with your marine hospitals?

Dr. PARRAN. Yes.

We had a recent example where the Navy needed to take over the whole area at Key West, including a small hospital which we had been operating there. But we haven't been able to establish an additional hospital, even though there may have been funds available for it.

It would be necessary to come to Congress and get a special law to establish any new marine hospital.

Senator HILL. I do not know of any reason why you should not have authority similar to that of the Veterans' Administration.

Dr. PARRAN. I would hope very much that the committee might give favorable consideration to your suggestion, Senator.

I was listing the major changes in this bill over existing law.

The interstate quarantine authority of the Public Health Service is clarified, and in time of war that authority is somewhat extended under Presidential order, in order to protect troops and war workers in controlling the spread of disease in interstate commerce.

That authority may be very important because of the possibility that strange diseases may be introduced in the country and become a threat. Flexibility in dealing with such contingencies would be very helpful.

Under 6: To prevent introduction of disease from abroad as a result of changes in transportation, especially air, modern rapid air travel, the laws are modernized.

In that connection I may have some further suggestions to make in the light of recent development since this bill was considered by the House committee.

These are the major changes which appear in this bill, Mr. Chairman. The details, section by section, are in the House report to which I have referred, and the principle additions; then changes taken in sequence appear beginning on page 3 of the report.

That is the codification, or, rather, as the House committee has called it, a consolidation and revision of the laws of the Public Health Service.

The bill makes no reference to the Bolton Nurse Training Act, presumably because it is limited to wartime, although this program

involves an expenditure greater than all other appropriations of the Public Health Service. Consequently it will make an important impact upon the whole nurse training and hospital situation in the country now and after the war.

Senator HILL. Well, I wish you would discuss that Nurse Training Act, Doctor. Would you give us the benefits of your thoughts and the recommendations you may have in the matter?

Will you tell us, sir?

Dr. PARRAN. This is a very important subject, Senator.

The Bolton Nurse Training Act is probably the most important public-health law passed by the House during the war.

It requires an appropriation during the coming fiscal year of some \$63,000,000.

That is a larger amount than all other Public Health Service appropriations. Therefore it is a major activity of the service.

Moreover, in its provisions the Public Health Service, in effect, has taken over the major cost of the training of student nurses and graduate nurses in the United States.

Under its provisions the law becomes inoperative at the conclusion of the war or at any earlier date determined by joint resolution of Congress, except for student nurses and others who have been enrolled longer than 90 days before the termination of the war.

It seems to me it is somewhat ambiguous and that possibly some doubt may arise as to whether the Public Health Service could, in fact, continue to give training to student nurses who had enrolled 90 days prior to the end of the war.

Leaving that subject for the moment, I think it is obvious to all of us, and to all who have been concerned about nurse education in the country, that this major impact which the Federal money has had upon nurse training may have unfortunate results when the funds are withdrawn.

The wartime pressure, of course, has been to get a larger number of nurses.

I should not anticipate that such pressure would be necessary during peacetime, but I have been concerned about the transition period to peace. I also have thought that the Public Health Service might, as a result of its experience, find it possible to aid in improving standards of nurse training, and especially in providing the post graduate training which will be needed as a continuing authority.

One example which is already before us is the psychiatric situation which we have seen develop in the war.

A large number of psychiatric casualties are occurring, as we all know. Yet there is a bare handful of nurses trained in psychiatric nursing to give care to them. We are, of course, emphasizing that phase of the problem in connection with our current program, but that is a need which will continue, even after the cessation of war.

Then, there are many nurse training schools, especially in the South and the rural areas of the country generally, in the small communities, which have had a very difficult time getting along even before the war. Problems of medical and nursing care will continue to be acute in such areas after the war.

They have been associated, generally speaking, with the small community hospital which, in turn, has had difficulty in getting along.

The funds which we are paying currently now—and most of them are paid to the nurses themselves rather than the schools—have been very helpful in aiding the schools to attain higher standards and to train better nurses, especially in the areas where there is a shortage of nurses.

It is with respect to such areas that I have been concerned as to what the result will be when this very large current Federal expenditure is withdrawn all of a sudden.

Senator AIKEN. Doesn't the War Department pay anything toward the training of the student nurses?

Dr. PARRAN. No, Senator; that is entirely the responsibility of the Public Health Service.

Senator AIKEN. Even as to the uniforms?

Dr. PARRAN. Yes.

Senator PEPPER. But the Public Health Service does that.

Senator AIKEN. I didn't realize that.

Senator HILL. Doctor, can you tell us just exactly what that program is today?

Dr. PARRAN. Yes. We are providing aid to the nurse training institutions, numbering 1,063, practically all of the nurse training institutions of the country. This includes tuition fees, cost of uniforms, and a small monthly stipend to the students.

Senator WEEKS. You are talking about this Bolton bill?

Dr. PARRAN. Yes.

The nurse may or may not attend school. If she attends, the benefits accrue to her. In return for these benefits she undertakes a moral obligation. It is not a legal obligation, it is a moral obligation: That she will make her services available in essential nursing for the duration of the war.

The total number in the United States Cadet Corps under the Nurse Training Act now numbers some 97,000 student nurses, of which 60,000 are new student nurses.

Senator PEPPER. How many have been graduated so far?

Dr. PARRAN. Approximately 12,000 will have been graduated during the current fiscal year.

Senator AIKEN. Those are the nurses that have had previous training?

Dr. PARRAN. That's right.

Senator AIKEN. You haven't been in operation long enough to graduate the new student nurses?

Dr. PARRAN. That's right.

Senator PEPPER. Does she get her certificate as a registered nurse?

Dr. PARRAN. Yes, and even before she gets her R. N., as a registered nurse, she is available for full-time nursing care in hospitals under supervision.

Senator AIKEN. Then when she goes home she will classify under the laws of the State she returns to?

Dr. PARRAN. Yes.

Senator HILL. These nurses are all women?

Dr. PARRAN. Yes.

Senator HILL. Have you any recommendations or any suggested amendments with reference to this last program that you think ought to be incorporated in this pending bill?



Dr. PARRAN. Mr. Chairman, I hope to have some to present later. It is my understanding that several of the nurse organizations of the country have asked to be heard in connection with that, and perhaps other problems, tomorrow. Will you permit me to defer my reply until we have heard the experts?

Senator HILL. Yes.

Senator AIKEN. In what way do these existing laws refer to tuberculosis, if any?

Dr. PARRAN. In no respect whatever.

I would emphasize, Mr. Chairman, the urgency from our point of view of securing passage of this bill which is before you.

The Public Health Service has been hoping for its passage for months. There are a number of things which we are anxious to undertake but hesitate to do in view of the pending law.

The tuberculosis bill to which I have referred, I think, could be amalgamated with this bill very easily.

In addition there are a number of administrative problems, clarification of our current appropriations and others, which would make for much more economical administration of our important war tasks if this law were on the statute books.

Senator AIKEN. There is one other question that I would like to get clear: This provides that instead of money collected from patients being covered into the general fund, under this revised law it would be covered into a revolving fund in the department.

About how much does that amount to? Have you any idea?

Dr. PARRAN. A very small amount.

The pay patients are chiefly volunteer narcotic patients treated at our hospital in Lexington.

Senator AIKEN. And they are more or less emergency cases?

Dr. PARRAN. Yes, they are. They are volunteers.

Also, other paid patients are foreign seamen whose care is requested by the consul of the foreign government in one of our marine hospitals.

They are the two classes that I recall now.

Senator AIKEN. It says:

Including any amounts received from any executive department on account of care and treatment of pay patients shall be covered into appropriations from which expenses for such treatment and care were paid.

Dr. PARRAN. That would not amount to any large amount. We are interchanging patients rather freely with the Navy, wherever the facilities are most available. Whatever money is reimbursed to us for the care of Army patients and Navy patients would be available for the appropriation rather than paid into the general fund.

Senator AIKEN. These sections referring to the War Shipping Administration would just naturally become—I don't know what page they are on—obsolete if the War Shipping Administration ceased to exist?

Dr. PARRAN. Yes.

That is a new group of patients which we are caring for now on a reimbursable basis, and since they are seamen or student seamen, it seemed more appropriate to have them cared for just as our old-line merchant seamen had been cared for.

Senator HILL. General, I believe under this bill you provide for a rear admiral as a dentist. Is that correct?

Dr. PARRAN. That is provided under existing law, Public Law 184, which was considered by this committee last year as S. 400.

So it is no change in existing law as regards the grade and the rank of the chief dental officer.

There is a change as regards divisions in the Service; one being the Dental Division and one the Sanitary Engineering Division.

They were specifically authorized under S. 400, but at the same time S. 400 authorized the Surgeon General to create such divisions, sections, and other units and rearrange the functions to meet needs from time to time.

We have already created a Dental Division. We have no thought of abolishing the Dental Division, although I know some of the dentists worried about the omission of the specific reference to that Division.

It seemed better to me to omit that reference lest we have pressure to set up other divisions and the administrative structure of the Service would become too crystallized and too inflexible if many divisions were required by law.

In that connection, if this committee considers favorably the tuberculosis bill, I would suggest there is no need to specify a particular division to administer it, since authority now exists for creating divisions as needed.

Senator HILL. You have a Dental Division and you have no disposition not to continue that Division?

Dr. PARRAN. That is correct.

Senator AIKEN. Do you have to have legislation every time you need a new division?

Dr. PARRAN. No. Fortunately not. But prior to the passage of S. 400 we did need a special law in order to create a new division.

Also, some divisions whose functions had become minor had become crystalized in the law while other more important activities could not be put on a divisional status.

Senator HILL. Any further questions?

Senator PEPPER. Mr. Chairman, if I may direct Dr. Parran's testimony to section 311, page 27, under the heading, "Federal-State cooperation in general."

On line 20 the language is:

The Surgeon General shall also assist States and their political subdivisions in the prevention and suppression of communicable diseases, shall cooperate with and aid State and local authorities in the enforcement of their quarantine and other health regulations and in carrying out the purposes specified in section 314, and shall advise the several States on matters relating to the preservation and improvement of the public health.

Now, I haven't seen yet section 314. That may cover what I have in mind.

Dr. PARRAN. That section 314 has to do with the grants to the States.

Senator HILL. What page?

Dr. PARRAN. Twenty-nine.

Senator AIKEN. Is there any real change in the law there in regard to grants and services to the State?

Dr. PARRAN. Only in respect of the amounts authorized under section 314, at the bottom of page 29.

That amount is changed essentially from \$13,000,000 to \$20,000,000.

Senator AIKEN. No change in the formula for legislation?

Dr. PARRAN. Under section 314 (a) there is the exact language which has been in operation since 1938 in connection with venereal-disease control.

In section 314 (b), which has to do with general public health work, the only change is that the administrative costs were lumped in with the over-all figure rather than carried as a separate item. But the formula for aiding States is unchanged.

Senator PEPPER. Doctor, the point I wanted to clarify was whether or not the authority on page 27 plus what appears in section 314 is large enough to enable the Surgeon General to help and assist the States and their political subdivisions in any way authorized by law in the prevention and treatment of disease.

Now, I am anticipating that there will come hereafter authority which will provide for the construction, for example, of hospitals, and further aiding the several States and their political subdivisions in relation to the public health, and, of course, I was just wondering if this language is restricted so that if Congress were to make available a sum of money to aid in a hospital-construction program, for example, and in further aid to the several States, whether you would need additional authority or not.

Dr. PARRAN. I think not, Senator Pepper.

In other words, I think this basic authority is adequate, especially if you will read it in connection with section 314, where the language refers to the prevention, treatment, and control of venereal disease; then, in connection with tuberculosis, the comparable words are used in reference to the treatment of patients with tuberculosis and assisting the States to provide facilities for such treatment.

Senator PEPPER. I was thinking about the public health generally, and I didn't want to see you limited, then, to the treatment of tuberculosis or venereal diseases or to communicable diseases.

If you were provided by Congress with the funds with which to aid the States in furnishing hospitals, medical services, and dental services which would have relation to the public health, I was just wondering if this authority would be broad enough to authorize you to carry out a program like that.

Dr. PARRAN. The answer to that question would be in the negative. It is not sufficiently broad to authorize the activities you have just specified.

Senator PEPPER. It just seemed to me—

The Surgeon General shall also assist the States and their political subdivisions in the prevention and suppression of communicable diseases—

something to the effect, "in promoting the public health," or something like that—"in promoting the health and well being of the people."

Of course, I realize that you cannot spend money except what you are authorized to spend money for, but this is a grant of authority, not the appropriation of money.

Mr. Chairman, since this intended to be the basic law governing that authority, I had in mind that if Congress ever, for example, wanted to establish a hospital-building program, all they would need, for example, would be to put an item in the appropriation bill, as they put an item in that bill now for research.



They don't authorize tyou to spend it now, they just put an item in the appropriation bill and you have authority to go ahead.

I don't mean by this to give you money to go ahead, but I would like your authority to be broad enough for any purpose that Congress may provide funds for, and it would seem to me it might be well that the basic charter of authority not be limited to the prevention.

Senator AIKEN. Isn't this bill broad enough to authorize you to spend any money that you think should be spent, any money that Congress has authorized and appropriated?

Dr. PARRAN. I think the statement of Senator Pepper is correct.

Senator AIKEN. You should go ahead with the hospital program if you have got appropriations enough, but you would require broader authority?

Dr. PARRAN. We would require broader authority if we are to aid the States in connection with community hospitals, let us say.

Section 314 (a) has to do with venereal diseases; 314 (b) has to do generally with public health work, establishing and maintaining health services.

The amount authorized there is \$20,000,000.

Senator PEPPER. Where is that?

Dr. PARRAN. That is the bottom of page 29, 314 (b).

Senator PEPPER. Services or programs?

I wonder if there would be any objection to the insertion of the word "program," because the States might have a program as well as the services.

They might want to spend cooperatively, for example.

Senator HILL. Where is that language?

Senator PEPPER. Line 20 [reading]:

States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate public health services, including grants for demonstrations and for the training of personnel for State and local health work, there is hereby authorized to be appropriated for each fiscal year a sum not to exceed \$20,000,000.

Of course that is only the annual authorization of an expenditure, but that is a continuing authorization.

Dr. PARRAN. It is a continuing authorization with a ceiling of \$20,000,000.

Senator PEPPER. Well, it would seem to me if you inserted the word "program" there; of course that would be their programs instead of your programs.

Dr. PARRAN. Well, essentially they are State programs now.

Senator PEPPER. But I think if you could insert the word "program" there and also in the other place, could "also assist the States and other political subdivisions in the prevention and suppression of communicable diseases and in promoting the public health by the prevention and treatment of disease"—that is only a general authority, there is no money made available there. That is just a definition of the general authority.

Then it would seem to me that you would have authority to carry out any program that funds might be provided for by the Congress.

Dr. PARRAN. We may have been too conservative.

Senator PEPPER. While you are codifying the Public Health Service.

What funds the Congress may desire to give the Public Health Service is a matter of congressional discretion, but I think that it is



intended that the Public Health Service shall be the agency of the Federal Government to carry out whatever program Congress does provide for, and I was thinking it would save coming back again and amending this law, just as you don't want to amend it again by the tuberculosis law.

I just submit that as an observation for what it might be worth.

Senator AIKEN. I think, Mr. Chairman, before we wrote that in we would certainly want the full committee to give consideration before we authorize any program of hospital building around the country.

I expect the General is anxious to get the bill through and perhaps included in the bill what he thought he could get through rather than perhaps what would be needed to make a perfect program.

Senator HILL. The subcommittee cannot report the bill to the Senate. They have to report the bill to the full committee and it would have to have action by the full committee on any recommendation we might make.

Senator AIKEN. I think that would delay the passage of the bill somewhat.

Senator PEPPER. I was not contemplating that he would have any authority to go building hospitals, and I wasn't limiting it to the costs of the hospitals, except I just noticed he was limited to the suppression of communicable diseases, and I thought there were many other respects in which we from time to time would like to help the States in regard to public health.

Senator WEEKS. Mr. Chairman.

Senator HILL. Yes.

Senator WEEKS. Has it not been the practice up to this time to confine your relations to communicable diseases?

Dr. PARRAN. Not entirely, Senator Weeks. For example, there are dental health programs being carried on in the States under title VI, cancer control programs of a cooperative nature are in effect; and demonstrations to improve nutrition of school children are being carried out.

Senator WEEKS. In what way would the Senator's suggestion change the basic approach to the problem?

Dr. PARRAN. As I understand Senator Pepper's suggestion it wouldn't change our basic approach to the problem but would enable the additional things to be done for which we do not now have the basic authority; such as, for example, the giving of grants to aid in the construction of community hospitals.

That proposal was before this committee a few years ago, just prior to the war, and was passed by the Senate, as a matter of fact.

Senator PEPPER. But there would not be any funds appropriated for that and he would have to have additional funds appropriated to do anything like that.

Cancer is not a communicable disease, and I think there might be other cases where the States or other political subdivisions might appeal to the Public Health Service for aid, and he would look at the law and say, "That is not a communicable disease and therefore I cannot help you."

That is what I mean.

Senator WEEKS. Mr. Chairman, as a suggestion, could we have a memorandum setting forth the new approaches to the problem would be, developed as a result of Senator Pepper's suggestion, into what new fields?

What would that cover?

Senator PEPPER. Well, suppose we put it this way: To carry out such programs as Congress may authorize, relating to the public health.

Senator HILL. If you did that I am afraid you would not get anywhere.

You would have to come back to Congress just the same, would you not?

Senator PEPPER. Probably so.

Senator HILL. That would be the difficulty there.

Senator PEPPER. The only difference is that from time to time Congress may desire to add additional functions to the Public Health Service, give them additional authority and funds.

Now, in order to do that now you have to have an authorization here and you have to have an appropriation.

All I was trying to do was to simplify the mechanics of getting it done by saying that if we want to do anything that pertains to the public health our agency is the Public Health Service, and we could just put in \$1,000,000 for some new disease, or \$1,000,000 to this Public Health Service for so-and-so. It would not be subject to a point of order on the floor. It would probably be within the authority already granted to the Surgeon General and all we would need to do would be to provide the funds without a separate bill authorizing the thing to be done.

Like the hospital, instead of coming back here, instead of coming back here to get a separate bill he simply comes to the Appropriation Committee and says "We need a budget to build the hospital." All he needs is some funds, not authorization to build that hospital.

If it is not wise to do it now, all right. I just thought this was represented to us as a bill in which there was more or less the basic authority of the Public Health Service.

Senator HILL. That is exactly what it is. We are writing the chart of the Public Health Service, and any authority that is not embodied in this bill the Public Health Service will not have.

Senator PEPPER. It will not have, and it will have to be provided by a separate bill.

Senator HILL. Of course, under the language of section 13 the authority is limited to communicable diseases unless there is some other reference to some particular disease.

Is that not true, General?

Dr. PARRAN. That is true, Mr. Chairman.

Senator PEPPER. Could you not say "To aid the States and their political subdivisions in their health programs when funds may be made available by Congress?"

I just submit that for your consideration. When you get around to looking at the bill more, you can give it more consideration.

Dr. PARRAN. Thank you very much, Senator.

This is largely a matter of legislative policy, I should think.

Senator HILL. It is, but you might be very helpful to us, General, if you would follow through on Senator Pepper's suggestion.

What do you think of that Senator Pepper?

Senator PEPPER. I think it would be well when you come back tomorrow—you have heard what the other Senators have said.

We are not trying to start anything new in this bill.

I think our public-health services are going to expand.

We have a pitiful situation when some 3,000,000 or 4,000,000 men are unavailable for service on account of health.

That is a pitiful situation. After the last war we did nothing about it. We found exactly the same situation in this war.

There are lots of fathers and husbands today who are in the armed services; no doubt some of them will lose their lives; single men would have been in their places if they had not been physically or mentally deficient.

So after this war I hope we will profit by these two war experiences and start a public-health program which will in some proper way try to remedy the situation as best we can.

I think that covers that.

Dr. PARRAN. Thank you, Senator.

Mr. Chairman, in conclusion I would say that in a very careful reading of this bill there were one or two editorial errors and one or two points which need clarification. Our assistant general counsel, Mr. Wilcox, has given me a memorandum in relation to that which I should like to submit.

Also, if the committee wishes, I could submit the essential parts of the tuberculosis control bill which is also before this committee. It would require one rather brief paragraph inserted on page 29.

Senator HILL. That is the tuberculosis bill?

Dr. PARRAN. Yes. It would take care of all of the provisions of the tuberculosis bill, because the provisions not included in the paragraph to which I refer are now in the bill. They fit into the general mechanism of giving grants to the States for venereal-disease control and other activities.

Senator HILL. In other words, a paragraph inserted in this bill would say all the tuberculosis bill by itself does. Is that correct?

Dr. PARRAN. That is correct.

Senator HILL. Well, we won't stop to read that paragraph now but, Mr. Reporter, take that paragraph at this point and insert it into the record. Unless you gentlemen want it read in the record.

Dr. PARRAN. That paragraph is the exact language contained in the tuberculosis control bill. It is the same, Mr. Chairman, as section 2 of the tuberculosis control bill.

(The paragraph referred to is as follows:)

Insert, page 29, after line 15 and before line 16—

"(b) To enable the Surgeon General to carry out the purposes of section 301 with respect to developing more effective measures for the prevention, treatment, and control of tuberculosis, and to assist, through grants and as otherwise provided in this section, States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate measures for the prevention, treatment, and control of such disease, including the provision of appropriate facilities for care and treatment and including the training of personnel for State and local health work, and to enable him to prevent and control the spread of tuberculosis in interstate traffic, and to meet the cost of pay, allowances, and traveling expenses of commissioned officers and other personnel of the Service detailed to assist in carrying out the purposes of this section with respect to tuberculosis, and to administer this section with respect to such disease, there is hereby authorized to be appropriated for the fiscal year ending June 30, 1945, the sum of \$10,000,000, and for each fiscal year thereafter a sum sufficient to carry out the purposes of this subsection."



Senator HILL. Anything further, General?

Dr. PARRAN. That is all I have to say at this time.

Senator HILL. Senator Aiken, any questions?

Senator AIKEN. No.

Senator HILL. How about you, Senator Weeks?

Senator WEEKS. No.

Senator HILL. No questions. All right. Thank you very much, General.

Is Dr. Mead here? Mr. Willcox?

# STATEMENT OF A. W. WILLCOX, ASSISTANT GENERAL COUNSEL, FEDERAL SECURITY AGENCY

Senator HILL. You are the assistant general counsel for the Federal Security Administration, are you not?

Mr. WILLCOX. Yes, sir.

Mr. Chairman, we have, as Dr. Parran said, a number of minor suggestions of an editorial nature, matters we have picked up since the bill was passed by the House.

I have copies of those suggestions with the bill here.

Senator HILL. Suppose you give each one of us a copy of the bill then.

(Mr. Willcox distributes papers.)

Mr. WILLCOX. Most of them are minor and I can describe them.

Senator HILL. Will you do that, sir?

Mr. WILLCOX. The first one is in section 215 of the bill which starts on page 21. That section divides the regulatory authority in regard to Public Health Service in more logical and consistent fashion than is done under the present law, as to those made by the President and the Surgeon General and the Federal Security Administrator.

In the latter group, those made by the Surgeon General, we inadvertently included allotments from pay.

Since the general subject of pay is subject to Presidential regulation that should not be included there.

The correct statement appears on page 11.

We suggest deleting that phrase on lines two and three of page 22.

Senator HILL. What is the language on page 11 that takes care of that?

Mr. WILLCOX. On page 11, sir—

Senator HILL. Oh, I see.

Mr. WILLCOX. Subsection (c), beginning at line five, it says:

In accordance with regulations of the President, commissioned officers of the Regular Corps and officers of the Reserve on active duty may make allotments from their pay.

Senator HILL. Yes.

Mr. WILLCOX. That is appropriate to Presidential regulation.

Senator HILL. I see. I see.

What is your next one?

Mr. WILLCOX. Beginning on page 29 are the changes which would incorporate the tuberculosis bill.

The only substantive one is that paragraph on page 29.

Senator HILL. That is taken verbatim out of the tuberculosis?

Mr. WILLCOX. That is so, sir. We adopt the same procedure there that we adopted on the venereal disease program.



Senator HILL. I see.

In other words, all the procedure that you set up in the tuberculosis bill is already set up in this bill for your venereal diseases.

Mr. WILLCOX. That is correct.

Senator HILL. So you just put your tuberculosis in here with your venereal diseases and that takes care of that.

Mr. WILLCOX. That is right.

It requires a number of changes in the subsection lettering and numbering but no substantive change.

The next is on page 44, line 2, in regard to narcotic addicts.

That is a provision that is in the present law:

When sentence is pronounced against any person whom the prosecuting officer believes to be an addict, such officer shall report to the authority vested with the power to designate the place of confinement the name of such person, the reasons for his belief, all pertinent facts bearing on such addiction, and the nature of the offense committed.

Senator HILL. That is simply a reenactment of what is involved there?

Mr. WILLCOX. Yes. That is simply a reenactment of present law.

On page 47 there is a mechanical correction of subsection lettering.

On page 57 there is a matter of some little substance——

Senator HILL. What page now?

Mr. WILLCOX. Page 57, sir; section 366. Beginning the middle of the page is a requirement for bills of health.

Since this bill was enacted in the House there have been some further developments which make it look as though by international agreement there may be some substantial relaxation of the requirements of bills of health and, in order not to have to come back for amendatory legislation, we thought it wise to put in a provision saving "except as otherwise prescribed in regulations" any vessel shall be required to have a bill of health.

That would enable the Surgeon General to relax that requirement in accordance with any forthcoming agreement.

There is a corresponding clause on page 59 which we can strike out if that insertion is made.

There is another inadvertant omission of the provision that is in the present law in regard to the furnishing of certificates of compliance with quarantine regulations.

Senator HILL. That is in existing law?

Mr. WILLCOX. Yes.

In section 367 there is a proposed change. That is the section which would authorize the quarantine regulations to be made applicable to aircraft.

Senator HILL. What page is that now?

Mr. WILLCOX. Page 59, section 367:

The Surgeon General is authorized to provide by regulations for the application to civil air navigation and civil aircraft——

of the quarantine provisions.

The suggestion has been made that the work "civil" be deleted, in order that the same rules should be applicable, or a rule should be applicable, to military aircraft, not with any thought that the Public Health Service would undertake to enforce them as such but simply that the Army would adopt appropriate procedure to prevent introduction of disease through military aircraft.

Dr. PARRAN. Mr. Chairman, the present quarantine laws are applicable to aircraft.

We have had for the past year a committee of experts from the Army and Navy and Public Health Service which has been studying this whole problem of the introduction of contagious diseases into the United States. It is in accordance with the recommendations of that committee that the basic requirements before us now should be applicable to all surface and air craft, with interdepartment agreements being entered into under which the military would enforce the same laws with respect to their own ships and planes.

Mr. WILLCOX. There is a mechanical correction suggested on page 60 indicated in lines 9 and 10. That is in reference to the quarantine laws.

Senator HILL. That is to do what?

Mr. WILLCOX. That is to incorporate the changes, or to perfect the incorporation of the penalty provisions, the civil penalties, applicable to the quarantine laws.

It is a mechanical slip.

Senator HILL. In other words, that does not change anything.

Mr. WILLCOX. No.

One of the minor changes in law that this bill would effect is to clarify the application of penalties to the quarantine laws which have been in a rather unsatisfactory state and this is merely a mechanical correction of that.

On pages 65 and 66 there appears a mechanical change in lettering.

On page 68 again we suggest inserting a provision which is in the present law authorizing the acknowledgment of donations in aid of research.

The only change is that in the present law the figure is \$500,000.

In connection with the cancer program the corresponding authority was reduced in the House bill from \$500,000 to \$50,000, so we have done the same thing in this.

Senator HILL. Except for reduction in amount, it is the same?

Mr. WILLCOX. Yes. On page 79, the paragraph at the top of the page is designed to provide medical and hospital service for certain personnel of the former Lighthouse Service.

We found that was not adequate and after consultation with the Coast Guard we are suggesting a revised wording of that.

It is merely a continuation of present law, and we merely found that the wording that had proposed to continue present law would not be entirely effective.

Senator HILL. That is agreed on between the Public Health and the Coast Guard?

Mr. WILLCOX. That's correct, sir.

Senator HILL. So far as the purposes of the language it is exactly the same as existing law?

Mr. WILLCOX. That's right.

We don't want to deprive anyone who now has it of entitlement to Public Health Service benefits.

There is a representative of the Coast Guard here if you wish to hear from him.

Senator HILL. Do you have some questions, Senator?

Senator WEEKS. Well, my understanding is that it applies to the personnel in the Lighthouse Service.

Mr. WILLCOX. The former Lighthouse Service, which has now been absorbed by the Coast Guard.

Certain civilian personnel, lightkeepers, and boat crews, and other persons who are entitled to the benefits of the Public Health Service.

When that was consolidated with the Coast Guard a considerable part of that personnel were commissioned or enlisted in the Coast Guard, and they became entitled to the Public Health benefits under the general entitlement of the Coast Guard, but some have remained in a civilian capacity, and we don't want to deprive them of the benefits to which they are entitled under present law, and that is the whole function of this present provision.

It is a temporary provision, because they are not bringing any new people in in that status, but those who are now on the rolls, we don't think should be deprived of what they have in the way of entitlement.

In the long section of the bill that begins in the middle of page 79, relating to repeals, there are several mechanical corrections.

The first item there was merely one where we found some words had been dropped out.

Senator HILL. But no change in the intent or purpose?

Mr. WILLCOX. No change in that one.

And that is true of the other changes in this section.

Three or four of the changes that I have suggested we have got since the memorandum Dr. Parran offered for the record, and I should like an opportunity to revise that memorandum to bring those changes before the committee for action.

Senator HILL. All right. Will you provide us with that?

Mr. WILLCOX. Yes.

Senator HILL. Any questions, Senator Weeks?

Senator HILL. Thank you, sir.

Dr. Mead.

Dr. Sterling V. Mead of the American Dental Association, city of Washington.

Doctor, we would be delighted to have you make any statement you see fit.

#### STATEMENT OF DR. STERLING V. MEAD, AMERICAN DENTAL ASSOCIATION

Dr. MEAD. Mr. Chairman and gentlemen, I represent here for the American Dental Association some 65,000 dentists in civil life and some 17,000 in the services.

I appeared before this committee last year on the public health law when it was put into effect and asked that dentistry be given a special bureau to correspond with the Bureau of Medical Service, State Service and National Institute of Health that they have for medicines.

It was discussed very freely and after the presentation of our facts over the objection of the Surgeon General and the Medical Department we were given a separate division, which satisfied us.

The bill passed Congress and I think everybody was satisfied with the bill. I believe the Surgeon General was satisfied with the bill. I believe everybody is pleased with the way it is working out.

We were then notified of the hearing at the House on the recodification of the laws and we did not appear, but they inserted a paragraph which is not pleasing to us.



The paragraph calls for in effect, the opportunity for the Surgeon General to eliminate this division which has been established over the protest of the department by Congress, and we do not want the opportunity for anyone to abolish the division that we now have, because there are a lot of things I think in public health that they are planning themselves, and things that the American Dental Association are planning, and the least the dentists can have would be the division we now have.

I think anything else would work to the detriment of the Service.

There is no connection between medicine and dentistry except one of cooperation.

We have our own schools, we have our own State boards, our own literature, but there is a strong spirit of cooperation.

But when you get into the Services there is a tendency to subordinate dentistry and it is not good for the dental service and it is not good for the public.

And so we urge that in the reorganization the change be left out that allows the division to be abolished at the will of the department against that given to us by the Congress.

Senator WEEKS. Where is that in the bill?

Dr. MEAD. I don't know where it is in the bill but in the House report it is on page 5, in the House report section 202, the last paragraph in 202, the statutory requirement contained in Public Law 184, that there be maintained a Dental Division and a Sanitary Engineering Division has been omitted as imposing an unduly rigid administrative structure, though the division of chief dental officer and chief sanitary engineer would be continued.

They tell you we still have a rear admiral, but, rank without authority does not do you any good, and we feel the least we should have would be the division that we were satisfied with.

They have seen fit to take care of the Institute of Health and so forth.

We ask that the same thing be done for dentistry.

Senator HILL. Any questions, Senator Weeks?

Senator WEEKS. No.

Senator HILL. General, would you like to make any comment at this time?

Dr. PARRAN. If you would permit me at this time, yes.

I should say that the American Dental Association has been one of our strongest supporters. It is an agency which has cooperated with us for many years.

My good friend, Dr. Mead, disagrees with me at times on some of these administrative problems.

I think the language of the House report quoted by Dr. Mead is not quite accurate.

I read from section 3 of Public Law 184, which is the law to which Dr. Mead has referred.

Senator HILL. That is the law we passed last August?

Dr. PARRAN. Yes.

Senator HILL. And to which the doctor has referred?

Dr. PARRAN. Yes. And the pertinent language in the first sentence of section 3 of Public Law 184 is as follows:

There is authorized to be established in the Office of the Surgeon General a Dental Division and a Sanitary Engineering Division; the Chief of each such



Dental and Sanitary Engineering Division shall be a commissioned dental officer and a commissioned sanitary engineer officer, respectively, of the Regular corps detailed by the Surgeon General—

and so forth.

In other words, this was an authorization and not a requirement.

Under the authorization and in carrying out the intent of the Congress, I did establish a Dental Division which is still in operation. As I said in my earlier testimony, we have every expectation of continuing it.

Dr. Mead has referred to the four divisions.

It is true that the Reorganization Act, Public, 184, and the bill which is before you, divides the Public Health Service into four major divisions.

Two are called bureaus; one is called the Institute of Health; the other, the Office of the Surgeon General.

That pattern was developed after a good deal of thought, and I did oppose setting up a separate dental bureau and a separate sanitary bureau.

Perhaps, had that been done, we would have been under pressure to set up another bureau for pharmacy and perhaps for nursing as well as for the other specialist activities which cut across the other functions of the Service.

It is my thought that we should have dentists in our hospitals, in connection with our public health work with States, and dentists doing the research work in the Institute of Health.

I am very well satisfied with the present arrangement and would prefer that the language in H. R. 4624 be continued, and not changed, the net result of which would be again to crystalize the administrative structure of the Public Health Service and make it impossible for changes to be made in the future to meet future needs.

Dr. MEAD. Mr. Chairman, we still have the feeling that that was a requirement that there be maintained a dental division.

In other words, that it was necessary to have Congress give us that authority we wouldn't have had, and while the present Surgeon General is in sympathy with what we have, we hope he will always be Surgeon General, but we also want that provision.

Senator HILL. General, you brought it out in your testimony, I don't know whether it was before Senator Weeks came in or not, you spoke about your four divisions and your two bureaus.

Now, right at this point in the record, since we are talking about this division of dentistry, on those two bureaus, would you define them again?

Dr. PARRAN. Yes; the Bureau of State Services deals with our activities in cooperation with the States and Territories.

Senator HILL. Yes.

Dr. PARRAN. Included under the Service is the Social Security Act and the wartime health and sanitation program.

Included also is the Division of Venereal Control and the Division of Industrial Hygiene.

Under the Bureau of Medical Services there are included the Division of Marine Hospitals giving care to our legal beneficiaries; the Division of Mental Hygiene which has two large narcotic hospitals under its control; and the Bureau of Foreign Quarantine and Immigration.

Those comprise the functions of the respective bureaus.

Senator HILL. Doctor, is there anything else you would like to answer?

Dr. PARRAN. No; I think that is all.

Senator HILL. Mr. Weeks?

Senator WEEKS. No.

Senator HILL. Doctor, we want to thank you. I know you are a very busy man and we appreciate your coming.

Off the record.

(Discussion off the record.)

Senator HILL. Now, Mr. Haddock, legislative representative of the C. I. O. maritime committee.

Come around, Mr. Haddock.

**STATEMENT OF HOYT S. HADDOCK, LEGISLATIVE REPRESENTATIVE, CONGRESS OF INDUSTRIAL ORGANIZATIONS MARITIME COMMITTEE**

Mr. HADDOCK. My name is Hoyt S. Haddock, legislative representative, C. I. O. Maritime Committee.

Senator HILL. Yes. We will be happy to have you make any statement you see fit, Mr. Haddock.

Mr. HADDOCK. I just have, Senator, a brief proposed amendment to H. R. 4624.

I propose as follows:

Section 322, page 34, insert as (2) (a) or a new (3) the following—

Senator HILL. Will you state that again? My attention was distracted for just a moment.

Mr. HADDOCK. Section 322 on page 34.

Senator HILL. Page 34.

Mr. HADDOCK. Yes. Insert as (2) (a) or a new (3) the following:

Seamen employed on foreign-flag vessels which vessels are owned and/or operated by American citizens, partnerships, or corporations.

And then, section 322 (7) (b), page 35, line 16, insert after the word "Vessels" and before the word "may" the following:

Owned and/or operated by foreign citizens, partnerships, or corporations.

Senator WEEKS. Is that foreign citizens?

Mr. HADDOCK. That is correct.

owned and/or operated by foreign citizens, partnerships, or corporations.

The purpose of those amendments is to provide the services of the Public Health to merchant seamen who are employed on foreign-flag American-owned vessels, just the same as seamen who are employed on American-flag, American-owned vessels.

Now, the only difference here is the question of the flag that may be flying on the mast. The ownership and operation is American and in most instances the crew, the number of American citizens in the crew, is comparable to the number that are on American-owned, American-flag vessels.

Under present laws these seamen are not entitled to the services under the same conditions as are seamen on American-flag vessels, and this would give them the same rights.

Under the present law they can only get that service when it is requested by the master or the consul of the flag which the ship is sailing.

Under the amendment the seamen could come to the Public Health Service the same as merchant seamen, and get that attention.

Senator HILL. Well, are all these seamen American citizens?

Mr. HADDOCK. No, they are not all American citizens.

Seamen aboard American-flag American-owned vessels are not all American citizens.

There is a comparable—the number of American seamen; that is, citizens, aboard these ships—are somewhat comparable to the number aboard our own flag ships, and this would apply principally to vessels such as Panamanian and Honduran.

That is where the bulk of the American-owned American-flag vessels is at the present time.

Senator HILL. Let me make sure now:

A citizen of a foreign country is on a ship that is flying a foreign flag, that ship being owned and operated by American citizens. They come into a port where you have a marine hospital and say they are sick.

Under your amendment you would admit them to your hospital.

Is that correct?

Mr. HADDOCK. That is correct. The same as if he were aboard an American-owned American-flag ship.

You see, the only thing you have done is change the flag of the ship. They get their seamen the same as an American-flag American-owned vessel.

Take for instance the Stendard Fruit Co. that operates under Panamanian or Honduran flag.

They get their seamen through the offices of the National Maritime Union, all of them.

There may be foreign seamen in the crew, just the same as if they were in any other company American-owned, operating out of the United States; and the only difference is that they are not entitled to the same care under the Public Health Service as the other seamen who may be on an American-flag vessel.

Senator HILL. Were these amendments submitted to the House committee?

Mr. HADDOCK. No, sir; they were not submitted to the House.

We thought this was covered in the bill, but we find it is not.

We have discussed it with Public Health Service and Federal Security and I think we are in general agreement on it.

However, those gentlemen should speak for themselves on it.

There is one question in connection with this and that is the possibility of continuing this service only for the duration of the war.

We feel that it should be a permanent change in the law, and if there are conditions after the war, new conditions that develop after the war, that may make it desirable to remove this expansion of service, we think it should be considered at that time, and if those reasons are of enough import, that the law may be changed at that time.

Certainly they would need that coverage at the present time. Many of these seamen aboard American-owned foreign-flag vessels do not get the proper hospital and medical attention and they have to



be practically down and out before they can get in the service at the present time, because of the law.

Now, leaving that, there is one other question that you raised this morning, Mr. Chairman; we are very much concerned with it and we are hopeful that your committee will not only consider but will write into the law the authority for the Public Health Service to establish hospitals.

Now, there has been a great need for hospitals, and that need is growing, as you well know, and it has been an almost impossibility to get the establishment of hospitals by Congress over the last number of years, and we feel that the Public Health Service has the right to go ahead and survey and find locations and proceed, only having the necessity of getting the appropriations, in order that they get adequate hospitals, and there are a number of places where those hospitals are needed today.

Senator HILL. You are speaking now of marine hospitals?

Mr. HADDOCK. That is correct.

Under this bill I think I am correct when I state that these laws should be interpreted that merchant seamen will be admitted to all facilities of the Public Health Service and not just marine hospitals.

That is a very desirable thing from the viewpoint of the American seaman.

He is going to require many services and he is not acquiring them today that may not be available in the marine hospitals.

Senator HILL. Any other questions?

Senator WEEKS. Yes. In section 3 as you suggested, I understand that. Let us go over then to page 36, line 16.

Mr. HADDOCK. Yes. That is simply a clarifying—

Senator WEEKS (interposing). You said foreign-flag vessels owned by what?

Mr. HADDOCK. On 322, section 7 (b), that is owned or operated by foreign citizens, partnerships, or corporations.

That is to make it perfectly clear that where application is made for seamen into hospital service on the part of the master of a foreign ship, or agent of the master, that that is to apply only to foreign-owned vessels and not American-owned.

Senator WEEKS. Well, in the one case you say the foreign-owned vessels and/or vessels under foreign flag owned by American interests, whatever they may be. And in this case foreign-flag vessels owned by foreigners.

Mr. HADDOCK. That is correct. That is correct.

Senator WEEKS. Well, you are requiring under your amendment that a man may be given the same treatment on foreign-owned foreign-flag vessels as they would be on foreign-flag vessels owned by American interests.

Mr. HADDOCK. They are entitled to that now, except that the foreign owner must pay for that service.

Senator WEEKS. Will he continue to have to pay for the service?

Mr. HADDOCK. Yes, he would have to continue paying for it.

The amendment I am asking for is to permit the practical application of the law to seamen aboard American-owned foreign-flag vessels, and that is all. Today they don't have the practical application to the services that they would have otherwise.

Now, under 7 (b), the operation of that is very detrimental to the seaman because he only gets into that service when he is flat on his



back. That is the only time that the foreign-owned foreign-flag vessel agent or master will apply for the service and let him have it.

Senator HILL. Any other questions, Senator?

Senator WEEKS. No.

Senator HILL. We might ask Dr. Parran.

Dr. Parran, have you any suggestions you want to make?

Dr. PARRAN. Yes, Mr. Chairman. This matter has not been discussed with the Bureau of the Budget. It has been discussed informally with the general counsel of the Federal Security Agency, and certainly for war-time we would impose no objection to the amendments which Mr. Haddock has suggested.

It is a little difficult to visualize what the shipping situation may be in the days of peace.

Senator WEEKS. Well, does this authorize treatment in time of peace?

Dr. PARRAN. The amendment as proposed would do so; would it not?

Mr. HADDOCK. It would.

Senator WEEKS. Well, does this general section authorize it in time of peace?

Dr. PARRAN. This authorizes it in time of war or peace. This is the most ancient function of the Public Health Service, giving hospital care to merchant seamen. Beginning in 1798 that service was authorized.

Senator WEEKS. In war or peace?

Dr. PARRAN. Yes.

Senator HILL. That is what your marine hospitals were for.

Dr. PARRAN. Yes. And they were built largely by funds contributed by merchant seamen in the last century.

Senator HILL. Any other questions, Senator?

Senator WEEKS. No.

Senator HILL. Thank you, Mr. Haddock.

Mr. HADDOCK. Thank you, Senator.

Senator HILL. Any other witnesses who would like to be heard at this time?

Dr. PARRAN. Lieutenant Drexler, of the Coast Guard. May I say that Lieutenant Drexler before he entered the Coast Guard had a large part in the beginning stages of preparing this reorganization and codification at the time he was on the staff of the general counsel in the Federal Security Agency, so he has intimate knowledge of this legislation.

#### STATEMENT OF LT. STANLEY L. DREXLER, UNITED STATES COAST GUARD

Senator HILL. Lieutenant, will you give your name?

Lieutenant DREXLER. Lt. Stanley L. Drexler, Coast Guard.

Senator HILL. All right, Lieutenant. We will be glad to hear you.

Lieutenant DREXLER. I am here on behalf of the Navy Department which has one question with regard to section 326 (b) of the bill.

Senator HILL. What page is that, do you know?

Dr. PARRAN. 38.

Lieutenant DREXLER. 38. This section has to do with the hospitalization of the dependents of Coast Guard personnel, Public

Health Service commissioned officers, and officers of the Coast and Geodetic Survey.

Under the laws that existed prior to this bill Coast Guard dependents and Public Health Service dependents and Coast and Geodetic Survey dependents were authorized at Public Health hospitals at the uniform per diem rate of Government hospitals and that rate is \$4.25 a day. I believe it may have gone to \$4.75 a day.

The Coast Guard in time of war operates as part of the Navy and the facilities of the Public Health Service I think have been available interchangeably for Coast Guard dependents.

Now, the rates which are prescribed by the President for Navy dependents, which include Coast Guard dependents, at Navy hospitals have been fixed at \$1.75 a day.

So, there is a rather complete lack of uniformity between what a Coast Guard dependent pays when he is in a Navy hospital or Public Health Service hospital.

Now, this subsection changed that by providing that the rate should be as prescribed by the President.

Senator HILL. Uniform rate.

Lieutenant DREXLER. Uniform rate.

Now, what the Navy would like further than that is that it not only be uniform with rate established for the hospitalization of Navy dependents at Navy hospitals, so that there be uniformity not only among the three classes taken care of by the Public Health Service but that there be uniformity between those classes of the Coast Guard at Navy hospitals.

We would like to write in a proviso that at least in time of war when the Coast Guard is operating with the Navy that the Coast Guard dependents be treated the same at Navy hospitals.

Senator HILL. What language do you suggest?

Lieutenant DREXLER. I didn't come with a specific suggestion.

Senator HILL. May I suggest that you and Mr. Willcox come back—get together and prepare some language for us?

Lieutenant DREXLER. Fine.

Senator HILL. In other words, when you are in the Navy you feel that the dependents of Coast Guard ought to have the same rates as Navy does.

Lieutenant DREXLER. That's right.

Senator HILL. At Navy hospitals.

Lieutenant DREXLER. That's right.

Senator HILL. Well, you and Mr. Willcox prepare an amendment to that effect so we will have it before the committee, will you?

Lieutenant DREXLER. Yes.

Senator HILL. Any questions, Senator?

Senator WEEKS. No.

Senator HILL. Anything else, Lieutenant?

Lieutenant DREXLER. No; that is the only point the Navy is concerned with.

I would like to make one thing clear—I would like to find out as a matter of policy what the committee would like to do. Would the committee like to extend this uniformity not only to Coast Guard but also to Public Health Service and Coast and Geodetic Survey?

Senator HILL. Well, that would be a matter for the committee to determine. I think you might prepare two amendments. Then we will have both of them before us.

Lieutenant DREXLER. I might say, Mr. Chairman, this question has been the subject of communication from the Secretary of the Navy and it has the approval of the Budget Bureau.

Senator HILL. Good.

Senator WEEKS. The rate is practically \$3 more.

**STATEMENT OF DR. L. R. THOMPSON, ASSISTANT SURGEON  
GENERAL, PUBLIC HEALTH SERVICE**

Dr. THOMPSON. The Coast Guard dependent goes into the Navy hospital and pays \$1.75. If there is no Navy hospital available he has to go into the marine hospital and it is \$4.75.

Senator WEEKS. The effect of your amendment would be to give the \$1.75 rate.

Dr. THOMPSON. Yes.

Senator WEEKS. The effect of that would be you would have two rates current in your hospitals.

Dr. PARRAN. May I respond to that question, Mr. Chairman?

Senator HILL. Yes.

Dr. PARRAN. The effect would be we would have uniform rate for dependent members of the families of the uniformed services instead of the two rates which are now in effect.

Senator HILL. What is your comment on the suggestion, General?

Dr. PARRAN. Mr. Chairman, I should think the simplest way to accomplish this purpose would be to amend section 326 (b) in line—page 39 in lines 9 and 10—to provide that the cost should be at such rate as may be prescribed in regulations of the President from time to time for that care of dependent members of the families of the Navy.

Before the House committee Rear Admiral Luther Sheldon on March 24 submitted some testimony which was very impressive. That testimony is to be found on pages 169 and 170 of the hearings on the Public Health Service bill H. R. 3379.

At that time he pointed out that the law worked a great hardship, especially on the enlisted men in the Navy whose wives frequently were hospitalized for a long period.

The theory by which the \$1.75 rate was arrived at, Admiral Sheldon explained, was that the basic facilities were there; the doctors and nurses were employed, and if the beds were available, the added cost to the hospital did not amount to more than the rate the President had established.

On the one hand, it was sufficiently low so that it could be afforded by the personnel of the Navy. On the other hand, it was sufficiently high so that there would be no attempt to abuse the privilege. This was decided after determining the additional cost.

Senator HILL. What would be the effect?

Dr. PARRAN. It is a relatively small part of our total business, of course. A very small part of it.

Senator HILL. You would look with favor then on the suggestion?

Dr. PARRAN. I should, Mr. Chairman.

Senator HILL. Any question?

Senator WEEKS. No.

Senator HILL. Thank you very much.

Any other witness who would like to be heard at this time?

(No response.)



Well, if possible we would like to go on with these hearings tomorrow, Senator. I will notify you further. It depends on some out-of-town witnesses, whether or not they can be here.

Mr. Badger, we will know this afternoon, won't we, about these witnesses?

Mr. BADGER. Yes, Senator.

Senator HILL. Thank you, gentlemen. If you will keep in touch with Mr. Badger, the clerk of the committee, he will advise you further.

If there are no further witnesses the committee will stand in recess. (Whereupon, at 12:15 p. m., the committee recessed.)

(The following letter was subsequently offered for the record:)

WAR DEPARTMENT,  
Washington, D. C., June 14, 1944.

The Honorable ELBERT D. THOMAS,  
Chairman, Committee on Education and Labor,  
United States Senate, Washington, D. C.

DEAR SENATOR THOMAS: Reference is made to the bill, H. R. 4624, to consolidate and revise the laws relating to the Public Health Service, and for other purposes, which was passed by the House of Representatives on May 22, 1944.

For your information in considering this bill, the following is quoted from a statement of the Governor of the Panama Canal:

"Although this proposed legislation is largely a restatement of existing laws relating to the Public Health Service it would make several substantive changes, including revision of language defining the legislation's geographical scope so as to make applicable to the Canal Zone for the first time certain quarantine and other provisions contained in parts F and G of title III of the bill. This change would result from the use of the term "possession" of the United States. The bill would also extend the right to free medical, surgical, and dental treatment and hospitalization at the expense of the Public Health Service to seamen employed on floating equipment of the Panama Canal, as hereinafter discussed.

#### "QUARANTINE JURISDICTION IN THE CANAL ZONE

"It is believed unlikely that the sponsors of the proposed legislation intended to extend the jurisdiction of the Public Health Service to quarantine matters in the Canal Zone, but the use of the term 'possession' would have this effect since the Canal Zone is consistently regarded as a possession of the United States by Congress and the various branches of the Government in the absence of express provision to the contrary.

"Section 361 of the bill, covering quarantine jurisdiction generally, provides that the Surgeon General, with the approval of the Federal Security Administrator, 'is authorized to make and enforce such regulations as in his judgment are necessary to prevent the introduction, transmission, or spread of communicable diseases from foreign countries into the States or possessions, or from one State or possession into any other State or possession.' The corresponding provision of the existing law (42 U. S. C. 92) refers to 'State or Territory' and therefore does not cover the Canal Zone. Similarly, section 364 of the bill provides that, with the approval of the President, the Surgeon General 'shall from time to time select suitable sites for and establish such additional stations, grounds, and anchorages in the States and possessions of the United States as in his judgment are necessary to prevent the introduction of communicable diseases into the States and possessions of the United States,' and that the 'Surgeon General shall control, direct, and manage all United States quarantine stations, grounds, and anchorages, designate their jurisdiction, and designate the quarantine officers to be in charge thereof.' Other provisions of the bill referring to 'possessions' of the United States are found in section 366 relating to bills of health, and in section 351 relating to the regulation of certain biological products. Section 2 (g) of the bill provides that the term 'possession' includes, among other possessions, Puerto Rico and the Virgin Islands. The Canal Zone must therefore be considered as being included within the term 'possession' as used in the sections referred to above.

"Section 371 of title 2 of the Canal Zone Code provides that until otherwise provided by Congress the President is authorized to make rules and regulations.



in matters of sanitation, health, and quarantine for the Canal Zone. Comprehensive quarantine regulations prescribed by Executive Order 4314 of September 25, 1925, as amended, and by the Governor of the Panama Canal are contained in chapter VIII of the Panama Canal pamphlet entitled 'Rules and Regulations Governing Navigation of the Panama Canal and Adjacent Waters.'

The chief quarantine officer of the Panama Canal, who is a Public Health officer assigned by the Surgeon General for duty with the Panama Canal, acts solely as a Panama Canal Health Department official in reference to local quarantine matters. The quarantine division of the Health Department of the Panama Canal is an integral part of the comprehensive organization charged by the Congress with the care, maintenance, sanitation, operation, government, and protection of the Canal and the Canal Zone (C. Z. Code 2:5). In respect to nearly all governmental activities in the Canal Zone the Canal organization has, since the construction of the Canal, acted as an independent agency under authority separate from that exercised by other Federal agencies in the continental United States. This is illustrated throughout the organic act as presently contained in title 2 of the Canal Zone Code by such provisions as those relative to separate customs service (C. Z. Code 2:61); postal service (C. Z. Code 2:271); control of air navigation (C. Z. Code 2:14); exclusion and deportation of persons (C. Z. Code 2:141); and control of sanitation, health, and quarantine (C. Z. Code 2:371).

"Under existing law, therefore, the Public Health Service does not purport to have or exercise quarantine jurisdiction in the Canal Zone and, as previously stated, it is believed unlikely that the sponsors of the proposed legislation had in mind changing the Canal Zone situation in this respect.

"This office is of the definite opinion that the proposed legislation should not impair or affect the authority of the President under section 371 of title 2 of the Canal Zone Code as aforesaid, and it is therefore recommended that subsection (g) of section 2 of H. R. 4624 should be amended to the following effect, the italicized words being new:

"(g) The term "possession" includes, among other possessions, Puerto Rico and the Virgin Islands, *but shall not include the Canal Zone;*"

#### "FREE MEDICAL, ETC., TREATMENT OF SEAMEN ON PANAMA CANAL VESSELS

"In addition to the above comment and recommendation, reference is made to section 322 of the bill providing for free medical, surgical, and dental treatment and hospitalization at hospitals and other stations of the Public Health Service, for certain described classes of seamen and others. Paragraph (3) of subsection (a) of section 322 extends the benefits of the section to seamen employed on any vessel of the United States Government of more than 5 tons' burden. Under present law (42 U. S. C. 6a) persons employed on vessels of the Panama Canal are expressly excluded from this provision.

"This change is noted in the House committee's report (Rept. No. 1364) which states as follows, page 19: 'The bill would omit the exclusion, but as the Public Health Service has no hospital in the Canal Zone it would not affect the present arrangement by which these seamen, when in the zone, receive hospitalization from the local government.' This statement does not recognize that the change would grant substantial benefits to a relatively small group of Panama Canal employees, both United States citizens and aliens, employed on floating equipment, such as tugs and dredges (see sec. 2 (h) of the bill for definition of the term 'seamen'), which benefits would not be accorded to any other Canal employees.

"Under present arrangements, seamen generally, who are entitled to free medical, surgical, and dental treatment and hospitalization under Public Health Service laws and who need such care and treatment in the Canal Zone, are accommodated at Panama Canal hospitals and the Panama Canal is reimbursed by the Public Health Service for the cost of such care and treatment. All employees of the Panama Canal receive free medical care and attendance in Canal hospitals, as provided by section 19 of Executive Order No. 1888 of February 2, 1914, prescribing conditions of employment, but they are subject to a subsistence charge during hospitalization and are not furnished free dental treatment.

"Under section 322 (a) (3) of H. R. 4624, Panama Canal employees on floating equipment of more than 5 tons' burden would be entitled to care and treatment at Canal hospitals at the expense of the Public Health Service, under the present arrangement referred to above relative to seamen generally, and this care and

treatment would include free dental treatment and free subsistence during hospitalization, benefits not extended to other Canal employees. There is no substantial difference in general conditions and hazards of employment as between this organization's personnel on its floating equipment and other personnel, and it is felt that the granting of special benefits to a selected group of employees who may not reasonably be distinguished from other Canal personnel in any respect pertinent to the merits of the granting of such benefits, is discriminatory, and, therefore, not in the best interests of the Panama Canal as a whole.

"For the reason, then, that the proposed provision under discussion would discriminate against other Panama Canal employees and that no reasonable basis for such discrimination exists, and bearing in mind that all Panama Canal employees already receive free medical care and treatment as aforesaid, it is recommended that, as in the present law, 42 U. S. C. 6a, the parenthetical phrase '(other than those of the Panama Canal)' be inserted after the words 'vessels of the United States Government' in section 322(a)(3)."

I concur in the views expressed by the Governor of the Panama Canal.

The Department has not been advised as to the relation of the provisions of the bill relating to the Canal Zone to the program of the President.

Sincerely yours,

HENRY L. STIMSON,  
*Secretary of War.*

# LAWS RELATING TO THE PUBLIC HEALTH SERVICE

TUESDAY, JUNE 20, 1944

UNITED STATES SENATE,  
SUBCOMMITTEE OF THE COMMITTEE ON EDUCATION AND LABOR,  
*Washington, D. C.*

The subcommittee met, pursuant to call, at 10:30 a. m. in the committee room in the Capitol, Senator Lister Hill (chairman) presiding.

Present: Senators Hill (chairman), Murray and Weeks.

Senator HILL. The subcommittee will come to order.

The first witness will be Marion W. Sheahan, president, National Organization for Public Health Nursing, and director, division of public health nursing in New York State.

Will you please come forward? We will be very happy to have you make a statement.

## STATEMENT OF MARION W. SHEAHAN, PRESIDENT, NATIONAL ORGANIZATION FOR PUBLIC HEALTH NURSING, AND DIRECTOR, DIVISION OF PUBLIC HEALTH NURSING IN NEW YORK STATE

Miss SHEAHAN. Mr. Chairman and members of the committee, I represent the National Organization for Public Health Nursing, which is a membership group made up of about 1,000 lay people from all sections of the country and over 10,000 nurses who are engaged primarily in community nursing. This organization is primarily interested in extending good nursing service to all the areas of the country, particularly services for public health.

We were interested in coming to this hearing and we requested it to discuss the place of nursing in the proposed recodification of the proposed United States Public Health Service. We thought there was need for considering the identity of nursing in that code in order to safeguard the future of a good nursing service.

First of all, I would like to discuss, I think, something that is well known but is one of the reasons for our request to appear at this hearing, and that is, it seems that there is an abundance of evidence as to the importance of nursing of various types and a great need to do everything that will strengthen good nursing service, because certainly we know that in time of peace, as well as in war, there is no more important service where it is needed than nursing in sickness and in the preventive aspects of the health program.

Therefore, we think that nursing has identified itself and really earned the right to an important place, in fact, the important place it does have because of the aid it has given to hospitals and community

nursing agencies and certainly in times of emergency such as war and in disaster and epidemics, which we are always heir to in the period between wars. It seems as though nursing just must be given greater consideration because it is a long-range type of personnel that will be needed, no matter what this country does in the future to safeguard the health of its citizens. It seemed to us, too, that the cost of nursing personnel is such a large part of every budget in hospitals and in community health services that anything that can be done to strengthen the status of nursing in the Federal Government is going to have a corresponding effect on the communities of the country.

Now, I do not know the proportion of the budgets of hospitals that goes to nursing personnel, but I do know in community services throughout the country that a well-organized health department service will recognize that nursing will cost up to 50 percent of the total budget, because it is the nurse that is the liaison between the health department, the health officer, the medical profession, and the homes.

Therefore, they represent the largest single group of health personnel throughout the country. The cost of the nursing budget alone almost presupposes the necessity for strengthening it in efficiency, so that every cent that goes into nursing really will produce results.

I would like to point out, too, without nurses to implement the medical programs throughout the country that not very much—I will not say very much, but certainly a large amount of the effectiveness would be lost because it is the nurse who interprets to the people, who applies the treatment ordered by the doctor, and then in the health services it is the nurse who actually goes into the home, meets the people in groups, tells them what should be done, and really motivates them to act.

For the most part, while you can do an en masse health promotion through the improvement of sewers and water supplies and milk supplies, and so forth, by and large it is a person's or an individual's responsibility, where the minor is involved, who must be encouraged to take action if children are going to be immunized against diphtheria and if mothers will in early pregnancy seek doctor's care, if tuberculosis patients are going to be hospitalized, if the nurse's contacts are going to be examined, and so forth, if syphilis patients are going to be under treatment until they are rendered noninfectious, all those things point to a vital need for a good nursing service.

We offer no apologies for much of the nursing service that has been done in the past, but we do know there is a long continuing need for a strengthening of that service. The fact that a great deal has been accomplished without too much organized assistance except from the professions of nursing throughout the country, and the contributions of nurses themselves, it seems to me those contributions only point the way for accomplishments that might come in the future if every opportunity to strengthen nursing at the Federal level is taken.

Certainly we know there is a growing consciousness throughout the whole country of the need for more nursing care in a community service so that the people who cannot afford to pay for private duty nursing and the other more expensive kinds of nursing care can get that service through community agencies who will provide care for the sick in their homes.



Now, it seems, too, that the United States Public Health Service has certainly demonstrated the value of Federal leadership. The grants-in-aid for the extension of health services made possible under the Social Security Act has certainly given returns that can be measured in terms of greater protection against communicable disease, which can be prevented, such as diphtheria and small pox, certainly in the reduction and the control of tuberculosis and syphilis, cancer, cardiac, and in the better care for mothers and infants of the country.

It would seem to me from my experience in the State department of health in New York that had it not been for that Federal assistance that we could not have demonstrated that, and nursing could not have taken its full share in protecting the health of the citizens during this war period when certainly everyone who can be kept well should be kept well so as not to complicate the war picture.

We were particularly happy to see in this proposed bill the increase in the possibility for appropriations for grants-in-aid to States because in order to distribute services a little more evenly throughout the country, particularly throughout the subdivisions of the Government, more Federal assistance in certainly indicated. We know there are large tracts and areas of this country that still have no community nursing service of any kind and that the grant of larger or greater assistance is one very good way of bringing about greater equalization of service throughout the country. We know there is need to increase the publicly supported nurses by at least more than twice the number of their present strength, that is, from about 20,000 nurses employed now in public health agencies, to about 60,000, in, I hope, the not too-far distant future.

So, it was gratifying to know the committee had recognized the importance of a larger grant-in-aid.

Now, we come to the war period and we found that brought out a great many problems in nursing. Certainly it brought out the fact that there was a shortage of nurses, particularly in many of the important areas of the country which became doubly important with the impact of war industry. We know that the sharing of the nursing strength of the country to meet the military needs of the country brought about a very grave situation and that something had to be done at the Federal Government level if we were to help the hospitals of the country and the community agencies of the country to meet the actual daily needs of the patients who were sick and in need of care. I need not remind this group that that brought about the passage of the Bolton Act that created a Cadet Nurses Corps.

Now again, as every experience brings about information and knowledge which points the way for the future, it seems that we have learned a great deal from the situation in nursing, which was brought to light through the war. It has uncovered a great many areas for further research and for possibilities of a great deal of reorganization and continued Government aid for the future. Certainly we know there has been introduced into the field of nursing care, and now I am separating nursing care by professional nurses from the total nursing service which is needed to take care of patients in hospitals; there has been a recognition besides the professional nurse there can be used a proper balance of other types of nursing care related to complete nursing service.

We know if it had not been for the introduction of nurses' aides, many of them voluntary, but a good many subsidiary workers who

are employed in hospitals, that the hospitals of this country could not have been kept open, and certainly the public health services of the communities could not have continued to do the job they have done if it had not been that they had a great deal of help from these non-professional workers who had contributed to certain aspects of nursing care, nursing service, all of which is part of good nursing care.

It seems to us we have gained a knowledge that there is a wide variation in standards for nursing education throughout the country, and also a wide variation in patient care and that is what we are all working for, good, not uniform patient care all over, but an adequate care in accordance with the needs of the patients.

There was uncovered and brought to sharp focus many of the things that we all knew but we had no urge or a national emergency to crystallize them into Nation-wide needs. There were spots in this country where there was no provision for nursing education whatsoever. Therefore, there were parts of the country that went without a good many nurses which the more favored sections of the country had in abundance. Therefore, the variation in patient care is one of the reasons why we think there should be a great deal of consideration given to the improvement of the standards of nursing in the future, and probably there should be some continuation of Federal assistance in one way or the other, even though we do not know the entire definition of the program.

We know there was a lack of instructors to provide good nursing education and a lack of supervisors, they being of equal importance to the production of good nurses as well as to good care of patients in the hospitals and the community agencies. We can see ahead the need for a Nation-wide determination of the types of personnel that will be needed to give good nursing care to the country and the balance of grades of personnel in relation to each other. We certainly can already see the need for some coordination at the Federal level of the training plans and the educational concept of the various kinds of personnel needed for good care. We can see a continuing need for the preparation of nurses to meet the future and the newer fields in nursing. Already we have heard through the newspapers, and I imagine you gentlemen have heard in greater detail than we in the communities, the very grave need for psychiatric care for returning veterans, as well as the huge problem in mental disease and temporary derangements, which are always prevalent in this country. That is a new field in nursing which must be considered and for which nurses must be prepared if they are going to take their part in any program for the care of psychiatric patients.

We already see ahead the very great need for nursing education in the programs for the handicapped. Already in our nursing journals, for instance, there has been a great deal of information as to just what the newer nursing techniques will be in the care of stumps left from amputations of limbs. Just the need for teaching nurses and preparing nurses continually to keep pace with those newer medical treatments is a very important need in this country because without good nursing technique the development of newer and better medical treatment and the preventive health services are absolutely impossible.

It seems to me, too, as the communities recognize the importance of a growing amount of nursing care in the homes of the communities, as well as in the hospitals in the communities, that there is a great need

for having the nursing service prepared to meet both ends, because we know that patients leave the hospital and go to the homes, and patients come from the homes and go to hospitals and there is a continuity of problem there which should be given joint thinking so that there may be simultaneous preparation for both ends of the service, the institution nurse as well as the community nurse, who takes the patient before and after hospital treatment.

All of this, it seems to me, leads to this point, that while there is no blueprint that we, representing the profession, can present to this committee, and it seems to me it would be foolhardy to even try to define such a blueprint, except as we can judge what the needs might be from the experience before the war and during the war period. I think, however, we can say without contradiction there is a need in this country for a growing competence in nursing, for an adequate quantity of nursing of various grades in order to meet the health needs of the people in this country in sickness, as well as in the preventive phases of the whole program, that will be both adequate and effective. The two parts of that competency have to do with the quality of the nursing, as well as a sufficient quantity of personnel, because if you spread quality too thin it ceases to be quality. If you think of quantity without quality, then quantity is largely wasted and you have a very small return for your money.

We would think this is important to recognize, too, that nursing has a special content and a special skill which has placed it as a profession, and it has its own identity within the broad field of medicine and it is therefore a specialty comparable to dentistry and sanitary engineering and medical care, which deserves an identity of its own, and while it is recognized that nursing is dependent upon the broad field of medicine, nevertheless, to be competent, that is, to have a competent nursing service, it seems to us it should be taken into consideration that it has a special content and skill which must be developed as nursing and not just as a broad type of personnel, all lumped under one personnel heading for health service or for medical care.

We think, therefore, that nursing deserves, in order to give it its best opportunity for development, a definite identity in the proposed code, to stamp it as a service of major importance in the promotion, the planning, and the execution of the future plans of the Public Health Service, which has Nation-wide significance, as we all know.

We therefore propose that this committee give consideration to possibly three amendments, or at least three premises, which we believe are quite important.

The first one is that some consideration be given to the reclassification of nursing personnel in the service in a commission corps.

Senator HILL. You mean in a Public Health Service?

Miss SHEAHAN. Yes; the nurses of the Public Health Service in a commissioned corps. I am not going to amplify that because the American Nurses Association is considered our over-all agency that speaks for all of the branches of nursing, and it seems more appropriate to let the defense of that particular recommendation come from that source.

We think it is highly important that there be a unification of nursing within the Public Health Service. There are three branches of nursing now in the Public Health Service, the hospital service, the public nursing service, and nursing education. There is, however, nursing



which runs through all and it seems to us that the unification of nursing should be recognized as a principle in the good development of nursing, and that therefore it should be given the administrative standing of a division of nursing in the Office of the Surgeon General.

Now, in reading this act, it appears that has already been provided for in a section which grants the Surgeon General the authority to set that up.

Senator HILL. He would have the power to establish such a division if he saw fit to do so; is that not true?

Miss SHEAHAN. That is right. We think that is quite important. We think there should be a Chief of Nursing Service much the same as there is a chief of other services, as has been provided in one section of the law. We realize, however, that the corresponding rank which go with those chiefs, that of brigadier general, would immediately introduce questions of rank already granted to the Chief of the Army and Navy Nursing Corps, and that therefore this committee might not wish to give consideration to including and making mandatory a Chief of Nursing Service in the same way that the other divisions have been identified in this law.

It is in recognition of that problem and probably of the wisdom of not having ranks in the public services for nurses that would go above the rank of corresponding nurse officers in the Army and Navy, that we are not suggesting that the division be mandatory in the law. It did seem, however, that it was so important that we not lose this opportunity to define the principle even though we recognize that the authority has already been granted to the Surgeon General in the drafting of this bill. Again we rather think that is a very wise and foresighted action on the part of the committee studying the future of the Public Health Service.

Thirdly, it seemed to us that it would be wise and desirable to include language in the code which will preserve the basis for the prompt reactivation of the nursing education plans which are already provided for in the Bolton Act, but which would also make permissive, give permissive authority to the continuation of the nursing education as a logical function of the Public Health Service in the event that circumstances seem to make that wise. We do that in full recognition of the implications of such a recommendation, with full recognition of the fact that there is probably more controversy about that particular recommendation than either of the other two. But, nevertheless, it seemed as though with medicine changing as fast as it is, with the needs that we can already see in sight, with the necessity for preparing nurses to meet these needs such as psychiatric nursing and the care of the handicapped, being the two immediate ones we can see in the future, it would seem as though there ought to be some provision in the law which would make for prompt action on the part of the logical Federal agency, without having to go through the longer job of getting permissive legislation as a first step in planning.

Senator HILL. In other words, you would make it possible to bring this program into being without coming back for further legislative action?

Miss SHEAHAN. That is true. Now, it seems as though that is foresight which would be accepted by the citizens of this country and may be required, and it is in recognition of the changing status in medicine and of the needs which we really have proof of now but



we certainly can anticipate will come in quick succession because certainly the growing development of new treatments in the care of the sick and the growing programs for the prevention of illness throughout the country have demonstrated that that whole science is one of quick development, and it would seem as though the Federal Government, being the representative of the people and being responsible for taking cognizance of everything that has to do with the health of the public of the country, it should be only logical the Federal service be granted that authority. It would make for prompter action, and it does not presuppose plans are not to be considered carefully in relation to the needs of the future. But, it would seem in the interest of an effective nursing service that you cannot separate the necessity for preparing nurses for the service which those nurses are going to render, and there should be some assurance of coordinated thinking for both ends of the program vested in some Federal agency.

Speaking in summary for the States' point of view, because I do represent a State department and a large one, that has taken full advantage of every aid that the United States Public Service has offered, it would seem from that point of view that the relationships which have been developed between the Federal service and the States has been such that you could feel confident of the fact that the States would welcome such continued help and that they already have recognized the importance of better coordinated planning between education and the services which the nurses are going to be educated to render. It would seem there should be a much greater utilization of field facilities in order to get a broader education so that nurses will be ready to participate in the expanding program of sickness, care, and health. I think I will put health first, because if you had every nurse in the country with a pretty good basic understanding of the positive aspects of health, you would have every nurse essentially a health worker who will be doing health protection while caring for the sick.

From the point of view of a director of a large service agency in nursing, it would seem to me that these three suggestions are in the interest of promoting a good nursing service of progressive competence to keep pace with what we already have evidence of in nursing and to be ready to meet the immediate growth of the future. It is not a static program and it seems to me legislation, particularly as far reaching as this, should really open the way and make it administratively easier to develop the kind of program that is needed.

Senator HILL. We were trying to get this bill passed before Congress recesses, which means we have a deadline and the time is very, very short. If we are to do that, we cannot inject much new material here, and when I say new I mean that which the House did not put in, because if we do we will get into a lot of controversy and that will cause great delay.

I am very much interested in all you have said.

Senator Murray, have you any questions you would like to ask?

Senator MURRAY. I find myself fully in accord with what Miss Sheahan has stated. I think her statement is a very impressive one and I agree with her conclusions in every respect. I recognize the fact, however, if we are going to pass this legislation we must not try to indulge in very serious amendments that might prevent passing it at this time. I think what you say is so important that it may be absolutely necessary for us to act on it in order to have the very best bill that we can possibly put through.

Miss SHEAHAN. We are aware of the importance of getting a bill like this through and we would not want to be responsible for postponing the passage of this bill.

I am rather dumb insofar as the wording of amendments of knowing all the implications of a thing like this, although I did a lot of home work and I tried to read it word for word.

Senator HILL. Did you try to read it word for word?

Miss SHEAHAN. Yes; and I have read some other bills and I think it makes sense to me, though perhaps I did not read all the significance that should have been read into some of these sections. But in talking about this to Dr. Parran; I think there are some proposals for amendments that would not be too serious. I think the inclusion of one word in one section, "nursing" on page 9, would do it. Now, I suppose one word sometimes can cause a lot of trouble.

Senator HILL. Well, if it is not the word "if" it does not cause as much trouble.

Miss SHEAHAN. The other section, which would grant broader authority for the public service to continue a program, it seemed to us again it implied really quite serious things for the future, but nevertheless since it was permissive and did not carry with it a definite plan or budget, it seemed to us again that it would be rather simple to amend it. Now, that may be my simplicity that makes me say that.

Senator MURRAY. I think we could rely on Dr. Parran. Of course, he fully recognizes the importance of nursing and I am sure any amendments that he proposes should be satisfactory to your nursing profession.

Miss SHEAHAN. Yes; I am certain of that.

I might say we felt as the people really responsible for promoting nursing throughout the country, and we do represent a large membership group, they are looking to us to see to it that the status of the nursing professional is safeguarded because after all it is not to improve the status of nurses as nurses or to give them a status that we are particularly interested in promoting. That is a byproduct which you can not help and which always more or less creates the impression that the group working for nursing as being selfish for nurses, but on the other hand, the two are interrelated. We have to stand the criticism which comes of selfish interest. But it seemed to us it would be most unfortunate because of the implications which are handed down from the Federal to the State to the local governments to pass a recodification bill like this without identifying nursing as one of the grave considerations of the committee. It seems an omission which is pretty serious and which is going to be fixed up by the nurses themselves and the people who already think nursing is pretty important. It is a serious omission and to the people who do not want to spend any money for developing nursing service, they are not particularly interested in it anyway, they will say we were always that way and we always will be. It seems it might encourage that kind of an attitude by setting the pattern from the Federal level and that is why we thought it was so important and we did make a request for a hearing, even though we do appreciate the work that has been done and the fact that it is a rather late date.

Senator HILL. You did not appear before the House Committee?

Miss SHEEHAN. We did not; no, sir.

Senator HILL. We are very happy to have you here this morning. We want to thank you for your statement, it was most impressive.

Senator MURRAY. I think you have made an excellent statement.

Miss SHEEHAN. Thank you.

Senator HILL. Mrs. Alma S. Scott, director, headquarters of the American Nurses' Association.

Mrs. Scott, we will be delighted to hear from you.

**STATEMENT OF MRS. ALMA S. SCOTT, EXECUTIVE DIRECTOR,  
HEADQUARTERS OF THE AMERICAN NURSES' ASSOCIATION**

Mrs. SCOTT. Mr. Chairman, I am Mrs. Alma S. Scott, executive director, American Nurses' Association.

The American Nurses' Association was organized in 1896 and it is the recognized professional membership organization of graduate registered nurses in this country. The association has constituent units of membership in every State in the United States, including the District of Columbia, Puerto Rico, and Hawaii. The association is a fact-finding standard-making body that acts in an advisory capacity to its members and at present the association has a membership of approximately 180,000 nurses. The status of these 180,000 nurses and of other nurses in this country, as well as the effectiveness of their service is influenced by the recognition which is afforded members of the nursing profession in the Federal Government services. Realizing this, the American Nurses Association has been interested and has worked diligently in order to secure commissioned rank for nurses in the Army and Navy Corps.

I need not explain, I think, to this committee the efforts which the association has put forth and the results which have been attained.

The importance of nursing as a vital and essential public service has been demonstrated throughout the years and the effectiveness with which this service has been given has depended to a great extent upon nurses themselves, who have throughout the last few years, particularly, given a great deal of time and money and effort in attempting to build up standards of nursing education and standards of nursing service which would be of assistance to the public. The importance of nursing has been emphasized during the war and I need not point out the value of the United States Cadet Nurse Corps, to this committee.

It is obvious that future demands for nursing will increase as time goes on and the American Nurses' Association working with the National League of Nursing Education, National Organization for Public Health Nursing, the Association of Collegiate Schools of Nursing, and working through the National Nursing Council for War Services, is attempting to determine and to meet these future needs. The American Nurses' Association believes that bill H. R. 4624, designed to improve and expand health services in this country should provide for a commissioned nurse corps in the Public Health Service if nursing in this Service is to function at its highest level of efficiency.

The reasons for this are: First, other personnel in the Public Health Service such as physicians, engineers, dentists, have been commissioned for many years and it is felt that nurses have demonstrated they have deserve the same recognition.



Second, almost 1,500 nurses are employed in the Public Health Service and practically all are engaged in work directly or closely related to military activity. Such a service is rendered to the merchant seamen, Coast Guard personnel, inmates of alien detention camps, civilian personnel in military cantonment areas, industrial workers living in Federal Public Housing Authority dormitories, patients in rapid treatment centers, venereal disease control hospitals, and workers in war industries. A large number of particularly well-qualified nurses have resigned to enter the military service where they have been given professional recognition. These could have been retained if nurses in Public Health Service had been commissioned. The future of nursing and Public Health Service will depend greatly on the recognition given to its nurses.

The country looks to the Public Health Service for leadership in the development of sound health programs. The public as well as the nursing profession expects this same type of leadership from nurses in the Public Health Service.

In order to assure this leadership, the American Nurses' Association strongly urges that bill H. R. 4624 be amended to provide a commissioned nurse corps and unification of nursing in the Public Health Service, comparable to other organizational units in the Service.

Senator HILL. You use that word "unification" of nursing.

Mrs. SCOTT. I am glad to tell you what I mean by that.

Senator HILL. Amplify that, if you will, a little, please.

Mrs. SCOTT. At the present time nursing is administered in a variety of sections under three separate bureaus, first in the Office of the Surgeon General, where we have a division of Nurses Education, in the Hospital Division, where the chief nurse has the status of the assistant chief of the Hospital Division, and in the Bureau of State Services in the State Relations Division, where there is a chief nurse consultant and other nurse consultants.

Senator HILL. Thank you very much for your statement.

Mrs. SCOTT. It is rather brief.

Senator HILL. Brevity is the soul of wit.

The next witness is Stella Goostray, outgoing president, National League of Nursing Education. What is your address?

#### STATEMENT OF MISS STELLA GOOSTRAY, OUTGOING PRESIDENT, NATIONAL LEAGUE OF NURSING EDUCATION

Miss GOOSTRAY. Boston, Mass. I am superintendent of nurses at the Children's Hospital in Boston.

Senator HILL. We will be delighted to hear from you.

Miss GOOSTRAY. I will try to be witty by being brief.

The National League of Nursing Education is a membership organization of about 7,000 nurses, who are engaged in various forms of advisory, executive, or teaching positions in the 1,300 schools of nursing which are scattered around our country, in hospitals, in public health agencies, and in the governmental nursing services. The chief end, of course, of this organization is to provide good nursing service.

We wish to go on record as approving the bill with the revisions which have been discussed by Miss Sheahan. We believe it is sound administrative practice to have all the nursing services of the United States Public Health Service under one administrative nursing head,



that it will provide for a more unified service and will offer more opportunity for growth and development and more flexibility within the service. And while there are diversified nursing services in the United States Public Health Service, they all have a common basis in nursing. We believe, also, that the nurses in the service should have rank. It is the only large body of professional people within the United States Public Health Service who do not have it and it has proven successful with the other groups.

It would provide for promotion and is in the interest of good nursing service.

There is a large group now who serve with the United States Public Health Service and that number, it is fair to assume, will increase very greatly. We believe the administrative head should have sufficient rank to enable her to sit with the policy and planning group to determine where nursing fits into the picture.

There is one point that I should like to enlarge on a little bit which Miss Sheahan has suggested, and that is the preparation for nurses of all types, including the preparation of graduate nurses for special fields. Up to the time when the United States Public Health Service gave support to nursing education, it had been largely supported by the meager student tuition fees and through the service which student nurses gave to hospitals in return for their education. We believe that other financial support is necessary if nurses of the level of competence needed by this country are to be produced, and we also believe that there can be no better investment than one in nursing education, because it is of value to the health and well being of our citizens.

Now, our experience with the Bolton Act has taught us very much about the variations in the quality of nursing education in our country and, therefore, in the quality of nursing care. One would almost think that the needs of patients changed with the borders of States. Because of the war emergency, the Bolton Act was directed at producing large quantities of nursing service by increasing the enrollment of students who give nursing service while they are being prepared to be graduate nurses. Without these large numbers of student nurses a very dangerous condition might have existed and a dangerous curtailment of hospital services.

We believe the post-war needs will call for a high quality of nursing service and that we can accomplish this by preparing graduate nurses for special fields, particularly Public Health nursing, school administration and teaching, and that will bring about better preparation of students and therefore better nursing care to patients.

Nursing is increasing very rapidly in its scientific content, in step with medical advances. It sometimes has been said there are no frontiers in nursing because there are no frontiers in medical science. Its social responsibilities are increasing also.

Approximately 30 percent of the supervisory and instructional positions in nursing schools and hospitals with schools are vacant at the present time and there also must be a very large number of vacancies in the supervisory positions in hospitals which do not have schools. Shortages are particularly acute in the care of children and in the care of mental patients. Mental patients occupy now more than one-half the country's total hospital beds and they have never had enough nursing care. Much of it has been custodial care and that of a very low order. Before the war there was approximately 1 nurse to 75 patients

in our mental hospitals and indeed it sometimes was 1 nurse to 1,000 patients.

Senator HILL. Could you have had that ratio in anything like a first-class hospital?

Miss GOOSTRAY. Considered a first-class mental hospital.

That ratio is less satisfactory now and you all know the expected increase in the type of patients that we are going to have after the war and certainly the need and what we owe these men, that is, the very best of care when they come back from overseas. There are only a few programs for preparation for nursing of this type and they ought to be greatly expanded.

Nurses returning from war and those at home for whom special study was not possible because of the great needs for medical service should be trained for this and other types of special service, particularly tuberculosis and the care of mothers and babies, rehabilitation of veterans, those in industry and public health, and we are now beginning to recognize old age has problems that we though could be taken care of by a less skilled worker and we find some of the problems of old age need the very best kind of nursing.

We have no blueprints, as Miss Sheahan has said, or specifications for the development of this education and service, but we should think there should be broad authorization to permit assistance in the development of nursing education and training, which will insure more adequate meeting of our nursing needs.

What I would like to finish with is this, although at present we can foresee no emergency and certainly we all hope that we will never have an emergency, such as we could have, we think it would be advisable to retain the essential provisions of the legislation to meet such emergencies should they arise and prevent delay in meeting the problems. Therefore, our organization would endorse two inclusions about nursing education. One, a broader permissive legislation to deal with nursing needs of the future, particularly for post graduate training, and also the retention of the legislation which could be made effective in the case of a national emergency.

We should also like to say our professional organizations stand ready and would expect to assist in the development of standards and we would hope to see included an advisory committee such as has been operating with the Bolton law.

Thank you very much.

Senator HILL. Thank you. I am sorry that Senator Weeks had to go to the phone and was not able to hear your whole statement. He is from your great state of Massachusetts.

We thank you for your statement, Miss Goostray. Is there anyone else here representing any of the nurses' associations?

#### STATEMENT OF MISS RUTH HOULTON, GENERAL DIRECTOR, NATIONAL ORGANIZATION FOR PUBLIC HEALTH NURSING

Miss HOULTON. I am from the same organization as Miss Sheahan and she has told you about its purposes, and so forth, and there seems very little that I need to add except to heartily endorse her recommendations and the arguments here presented this morning.

Dr. C. E. A. Winslow, who is a professor of public health at Yale University, chances to be chairman of our advisory committee. He

also is the present editor of the American Journal of Public Health. He has been very much interested in this bill and has written an editorial in the June magazine of the Journal of Public Health, from which I would like to quote very briefly, indeed.

[Excerpt from American Journal of Public Health and the Nation's Health, vol. 34, June 1944, No. 6]

#### THE UNITED STATES PUBLIC HEALTH SERVICE

This has been an important year for the Public Health Service in two respects. \* \* \*

One event of the year is the presentation of the United States Public Health Service reorganization bill. This bill simplifies and coordinates the work of the service under four main bureaus: The Office of the Surgeon General (including, among others, Divisions of Public Health Methods, of Dentistry, and of Sanitary Engineering); the National Institute of Health which remains the research arm of the Service; the Bureau of Medical Services (which includes Quarantine and Mental Hygiene) and the Bureau of State Services (which includes Venereal Diseases and Industrial Hygiene). Thus, final administrative authority is concentrated in 4 channels, rather than 10 or 12. The chiefs of the 4 bureaus and the heads of certain divisions acquire a rank comparable with that of brigadier general in the Army, which is a welcome acknowledgment of the importance of their work. Dentistry and engineering, in particular, occupy more important positions than before. It is unfortunate that public health nursing did not receive similar treatment. On the whole, however, the reorganization makes for efficiency and recognizes the prestige which the Service has so fully earned.

Dr. Winslow told me in a telephone conversation last night that he regretted very much he could not be present at this hearing today. He did authorize me to say this for him:

Nursing has been demonstrated over many years to be a service of major importance which should be strengthened through all channels available. In my opinion the proposed recodification of the Public Health Service should identify nursing as a service coordinate with medicine, engineering, and dentistry. In the interest of good administration, it is important to unify the nursing service in the United States Public Health Service with full recognition of the various parts of the service in which nursing is important. Dr. Winslow further stated in his talk with me over the telephone that the formation of a nurses' corps, giving rank to nurses, is indicated since other personnel have been recognized in this way.

There are certain other points I could make, but in view of the short time I think I will let that go.

It seems to me that Dr. Winslow's statement is an indication not only of the approval of the National Organization for Public Health Nursing for this addition of nursing in the bill but also might be an indication of the attitude of the American Public Health Association.

Senator HILL. We want to thank you very much for your statement.

Are there any other witnesses from any nurses' association?

I very much regret this, but I will have to leave for a few minutes to go up and vote at a session of the Military Committee. Before I go, I want to express my appreciation to these fine and splendid representatives of the nurses' associations who have come to be with us this morning.

I also want to express my deep sympathy with the aims and views which they have expressed here today. I am almost tempted to make a speech, but since I have got to go, I will say this, I have had more insight into nursing than perhaps you might think, being the



son of a doctor, the nephew of a doctor, the brother-in-law of two doctors, and the first cousin of six doctors, and I was named for a doctor, named for Lister, and I was scheduled to be a doctor, but I got off the track somewhere, I do not know how. I want to express my appreciation to each of you and my deep sympathy with your aims and purposes.

Miss SHEAHAN. May I add one thing? We are grateful to be here. If the size of our representation is to be taken as an indication of a weak representation, we can guarantee enough representation from the lay and nursing groups of the country to fill the gallery.

Senator HILL. I am sure of that.

Senator Weeks, will you please go ahead with the meeting? I believe Surgeon General Parran has something to say.

#### STATEMENT OF DR. THOMAS PARRAN, SURGEON GENERAL, UNITED STATES PUBLIC HEALTH SERVICE

Dr. PARRAN. To preface what I have to say, this matter has not been cleared with the Bureau of the Budget and, therefore, I am not aware as to whether or not what I say is in accord with the program at the present time.

As I indicated yesterday, perhaps in seeking codification of our laws we were somewhat shortsighted or perhaps too conservative in the number of items which we requested. In the testimony from the nurses this morning, I think three major representations have been made: One, that the nurses in the Public Health Service should have a commissioned status. In respect to that, from every administrative and other point of view, I am very heartily in support of that. Increasingly as the war has gone on it becomes clear that our nurses in the Public Health Service feel very justly they are discriminated against in that they are serving Coast Guard patients, and they are treating Navy patients and merchant sailors, and yet they have a civilian status, while nurses who are treating comparable patients in Navy hospitals have rank and uniform and status. Such a change in policy could be accomplished legislatively without too much difficulty in terms of an amendment to the bill, should the committee decide to give favorable consideration to it.

Since the war we have lost more than 25 percent of our nurse strength in Marine hospitals simply because the nurses were not satisfied to continue on a civilian status.

Nursing will be of increasing importance in the future. The Congress in past years, I think I recall, provided initially only for commissions to doctors. That was in the time of the last war. Then our Reserve Act was passed which broadened that authority and under it we gave commissions to sanitary engineers and dentists and a few other scientific personnel, such as entomologists and biologists, and so forth. Increasingly the scope of public health is broadened, and as it is broadened, we need the use of services of other personnel than just doctors and dentists and engineers. I think it is in keeping with the history of this matter, in the military services as well as with our own experience, that it would be highly desirable if we could have a commission status for our career nurses.

The second recommendation made by the nursing groups this morning was that all of the nursing interests in the Public Health

Service should be headed up into a division comparable with divisions which we now have for dentistry and for sanitary engineering. I, too, am in sympathy with that recommendation. As a matter of fact, it is one of the next steps which we are contemplating in connection with our current reorganization, which was authorized by Public Law No. 74 of last year.

We have a committee, on which some of the nurses who are here this morning have been working, who advise us concerning the future organization of nursing in the Public Health Service. The second recommendation by the nurses can be carried out by administrative action and does not involve a change or amendment to the pending bill.

Senator WEEKS. Did you object yesterday to the question as to the dental aspect of it; that is, a separate set-up would not work well because it would cut across your organization?

Dr. PARRAN. Yes, yesterday I was referring to dentistry and objected to the inclusion of a mandate in the bill for the setting up of one or another divisions, since that was now authorized under the law, and we do have a Dental Division. It would be my hope that we would set up a nursing division on a basis comparable to the Dental and Engineering Divisions. The point made yesterday was that it be written into the law as a requirement that there must be a Dental Division. While I am sure we shall always need the Dental Division, that precedent might result in other amendments specifying all and sundry kinds of divisions which one or another group might see fit to set up and write into the law.

Senator WEEKS. You feel the same way about this nursing division?

Dr. PARRAN. Yes; I think we can accomplish, and I know we can accomplish, the same purpose under the authority of the present law, which is carried forward in this program.

Senator WEEKS. I was not here during some of the testimony, and I will ask you, do the nurses suggest a different approach?

Dr. PARRAN. The nurses, as I understood their testimony, recommended strongly there should be such a division. I do not think they were insistent that the name of the division should be spelled out in the code.

Miss SHEAHAN. Just in principle and the law provides for it.

Dr. PARRAN. The third recommendation which the nurses have made is a rather fundamental one. As I understand it, it breaks down into two parts.

Yesterday, you may recall, at the suggestion of the chairman, I discussed somewhat the post-war place of the Public Health Service in connection with nursing and particularly nurses' education, having in mind our experience under the current Bolton Nurses' Training Act.

The recommendations of the nurses concerning education, and to some extent nursing service, are to the effect that it would be a shame to terminate such a successful law as the Bolton Nurses' Training Act immediately upon the cessation of hostilities, not because we would expect to continue appropriations in peacetime under that act, but in the event of a future war or national emergency, the act should be reactivated, should be brought up again.

In other words, the suggestion is to put it in cold storage rather than to wipe it off the statute books. That would enable Congress in the

event of a future national emergency or war to make appropriations under it, although it is not recommended that appropriations be authorized under the Bolton Act in time of peace.

Do I make myself clear on that?

Senator WEEKS. Yes. What is the termination date of the Bolton Act?

Dr. PARRAN. Essentially 27 months after the end of hostilities or such earlier period as the President may determine or the Congress by joint resolution may decide. The act terminates as I have stated, but there is a provision that payment shall be continued to nurses who are taking courses of study under the act who have started such courses 90 days prior to the end of the war. In other words, those nurses will have payments continued to them, their education will be continued to completion if they have entered the training school at least 90 days prior to the end of the war.

Senator WEEKS. Is that the reason for the 27 months?

Dr. PARRAN. Yes, the course runs for 30 months, the course under which they are being paid now. That is a matter of legislative policy and again I say I am not quite aware either of the attitude of the House committee or of the Budget in reference to that suggestion.

The second part of the nurses' recommendations is related somewhat to the discussion which we had—

Senator WEEKS. If I may interrupt for a minute, the nurses suggest that it be put in cold storage, so to speak. Just what is the *modus operandi* for doing that? Do they propose to incorporate it in this bill?

Dr. PARRAN. The *modus operandi* which has been followed in respect to certain wartime powers of the Public Health Service is that the appropriations authorized under our other acts apply in time of war or national emergency proclaimed by the President. In other words, the authorization for an appropriation would be limited, as I have indicated, in time of war or in national emergency proclaimed by the President.

The second part of the third recommendation of the nurses is as follows, and is somewhat the discussion which Senator Pepper initiated yesterday and in which he expressed a point of view that the Public Health Service should have a rather broad authority to assist the States with their public health problems generally, even perhaps assist in providing public health facilities, hospitals, and health centers and the like in the event of need, and depending upon appropriations which would be made by the Congress from time to time.

The suggestion of the nurses is that the Public Health Service should be given authority to provide for training and instruction both of undergraduates and graduate nurses in institutions that meet proper standards, simply because at this time it is difficult to know the nature and extent of the nursing problems of the country. We certainly do not want to continue to produce as large a number of nurses as we are doing currently under wartime programs, yet undoubtedly there will be need, some of which cannot be predicted in detail at this time, and it would be possible to meet such needs promptly and more effectively if such broad authority were maintained. I should point out we now have authority under title 6 of the Social Security Act, the Venereal Diseases Act, and in the pending tuberculosis control bill to provide for the training of personnel in



those particular fields of public health. But our current authority does not extend beyond giving training to personnel employed by State and local health departments.

The suggestion here is that authority should be broadened to the other fields of nurses' training, nurses' education.

Senator WEEKS. Were you going to give the committee some comments on the proposal of Senator Pepper as to how and in what manner that would aid the functions of the Public Health Service?

Dr. PARRAN. If the committee wishes, I should be glad to do it.

It is just a question of how far the committee wishes to go in giving Public Health Service added authority to aid the States in connection with public health work.

Senator WEEKS. What I was interested in personally was, assuming for example that Senator Pepper's proposal were adopted, what functions would that authorize the Public Health Service to undertake which it never before had undertaken?

Dr. PARRAN. It was not quite clear to me just how far Senator Pepper wished to provide additional authority, except in one respect. He referred to the probable need that will exist after the war for the Public Health Service to aid the States in the construction of hospitals, special community hospitals and health centers. He referred to them as public health facilities, I believe.

Senator WEEKS. I may have misunderstood him, but I gathered from what he said that he wanted to have the Public Health Service authorized to undertake possibly, on a share-for-share basis, every function that is presently undertaken by the State health departments, or whatever their title may be. Is that the way you interpreted his proposal?

Dr. PARRAN. Yes, and especially as regards construction, among other things.

Senator WEEKS. I would like to know what that would authorize the Public Health Service to do that it has never done before or has never conceived to be a part of its functions. Now, I do not want to involve you in anything that would require you to go into a lot of details. If you could put it down on paper and spell it out, I think the committee would like to see it just in case Senator Pepper brings forward his proposal again.

Dr. PARRAN. I shall be very glad to either attempt such a statement now or submit it to you later.

Senator WEEKS. You mean right this minute?

Dr. PARRAN. Yes.

Senator WEEKS. Unless it will take you a long time I think you might do that.

Dr. PARRAN. I do not think it will take a long time.

In Senator Pepper's discussion I think he overlooked the fact that the Social Security Act—

Senator WEEKS. Let me interrupt you for just a minute. Do I understand that the subcommittee is going to hold further hearings?

Dr. PARRAN. I do not think so; I think this is the last public hearing.

I think Senator Pepper had overlooked the authority which is now carried in the code under section 314, which is a very broad grant of authority to aid the States and include them in political subdivisions

in establishing and maintaining adequate measures for the prevention, treatment, and control of diseases, including the training of personnel. Senator Pepper, I think, had in mind that the States have the responsibilities not only for public-health service but frequently for the construction of buildings to provide medical care to the indigent, for giving care to certain wards of the State, which generally have not been embraced in the term "public health services," and it was under the language which I understood him to suggest, the Public Health Service in addition to what it is now doing would aid the States on any program which the States would determine is a public-health program. For example, in the State of Massachusetts a cancer program has been a feature of the work of the State health department.

In other States other activities have been carried out, such as water supplies and sewage disposal. Our current appropriations are not adequate to enable us to do very much, if anything, beyond providing the basic public-health machinery, the basic public-health personnel, key personnel, in the health work of the States.

Senator WEEKS. Can you think of any other operations that you might embark on besides cancer, water supply, sewage disposal?

Dr. PARRAN. Medical and nursing care of the indigent would be another field, programs of school health, including dental-care programs for school children, and such programs as that.

Senator WEEKS. I understand that the Public Health Service in this bill or otherwise has not come forward with any proposals that embark on those different activities; is that right?

Dr. PARRAN. That is right.

Senator WEEKS. You do not now make that proposal? You are simply making comment as to Senator Pepper's suggestions?

Dr. PARRAN. That is right. In fact, all my testimony this morning is given without being informed as to whether or not the several matters under discussion are in accordance with the program.

That is all I have to say at this time. I may revise my remarks as I check with the facts more accurately, to be sure what I have said is accurate.

Senator WEEKS. You wish to make a statement now?

#### STATEMENT OF ALANSON W. WILLCOX, ACTING GENERAL COUNSEL, FEDERAL SECURITY AGENCY

Mr. WILLCOX. Senator, you have had considerable discussion in the past few weeks in regard to the section of this bill, No. 351, which incorporates and reenacts the old act passed in 1902.

Under that act the Public Health Service licenses and controls the manufacture of virus serums, toxins, and so on. That is in the main simply reenacted by this section. There are some slight changes about this section which were pointed out in the hearings in the House and the representatives of the industry have raised some questions about it. We have had a good deal of discussion. I think they have been most cooperative in arriving at two suggested changes which we would now like to make in the interest of not delaying the possible enactment of this bill. With that view, I should say, if the bill should fail to be enacted at this time, we might want to explore some of these questions further with the industry and perhaps further

refinements may be made that would result from that. I think both they and we would be satisfied with the suggestions I am now going to make.

Senator WEEKS. How long would it take to make that further exploration?

Mr. WILLCOX. Too long, I think, to meet the needs if the bill were to be enacted this week.

There are a number of interested concerns and they have expressed themselves as willing to go along with the proposals we are now making.

I will make the following suggestions, bearing in mind what I previously said:

The first suggestion goes to page 51, at line 6, and it is to strike out the word "efficaciousness." That does not appear in the present statute and that would make the line read:

The continued safety, purity, potency of such products \* \* \*.

The other change is on the following page, beginning at line 4, subsection (g), page 52, and provides:

The persons and the products to which this section is applicable shall be subject also to the provisions of the Federal Food, Drug, and Cosmetic Act—

and then it has the exception of one proviso.

That, I am convinced, is the present law, though there has been some difference of opinion on the subject. I have made a study on the point, and I should like to file for the record a brief statement of our reasons for being confident that is the present law.

Senator WEEKS. It may be put in at this point.

(The statement referred to follows:)

Application of Federal Food, Drug, and Cosmetic Act to biological products.

In view of the question which has been raised it seems well to give you in writing the reasons which have led the general counsel and myself to express the opinion that the Federal Food, Drug, and Cosmetic Act, other than its provision for the licensing of new drugs, is applicable to biological products.

Section 201 (g) of the Federal Food, Drug, and Cosmetic Act defines the term "drug" in such fashion as to include the products in question. No one, so far as I know, has disputed this.

The argument turns on section 902 (c) of the Federal Food, Drug, and Cosmetic Act, which is urged as exempting biological products from that act. So far as pertinent, that subsection reads:

"(c) Nothing contained in this Act shall be construed as in any way affecting, modifying, repealing, or superseding the provisions of the virus, serum, and toxin Act of July 1, 1902 (U. S. C., 1934 ed., title 42, chap. 4); \* \* \*."

This language is explicit. It preserves the virus, serum, and toxin act despite the latter legislation. It does not state or suggest that biological products were to be exempted from the new law.

If there could be any question that the language means only what it says, attention should be called to the immediately preceding subsection of the Federal Food, Drug, and Cosmetic Act. Section 902 (b) of that act reads:

"(b) Meats and meat-food products shall be exempt from the provisions of this Act to the extent of the application or the extension thereto of the Meat Inspection Act, approved March 4, 1907, as amended (U. S. C., 1934 ed., title 21, secs. 71-91; 34 Stat. 1260 et seq.)."

Plainly, when Congress intended to exempt certain products from the Federal Food, Drug, and Cosmetic Act it used apt words to express that intention. The contrast in wording between subsections (b) and (c) of section 902 is the clearest possible indication that subsection (c) was intended, as it states, not as an exemption but merely as a preservation of existing law.

The meaning of the statute is in my opinion too clear to permit of resort to extrinsic evidence in aid of interpretation. If such evidence were to be considered,



however, it would show that the Treasury Department repeatedly urged that biological products be exempted from the new food and drug legislation, and that the committee consistently declined to accede to the request. I am fortified in my opinion by the knowledge that it accords with the deliberate decision of the committee which sponsored the Federal Food, Drug, and Cosmetic Act.

Mr. WILLCOX. The wording of that subsection has caused some alarm in the industry for fear it would mean duplication of administrative control, which is the last thing we want or anybody else wants. I am going to suggest that subsection be revised to read this way:

Nothing contained in this Act shall be construed as in any way affecting, modifying, repealing, or superseding the provisions of the Federal Food, Drug, and Cosmetic Act.

We are making that suggestion, only because we are confident that it does now apply. The controls which the Public Health Service exercises are, I think, very effective but there is also a possibility in anything of that sort that some product which is dangerous to life may inadvertently get out into the market. The Federal Food and Drug, unlike this act, contains seizure of power. We are very firmly of the opinion that the authority in law to pick up off the market any dangerous product that might have gotten out despite the most rigid controls should be continued and, as I say, it is only because of our confidence that this revised wording would continue that, that we are willing to suggest the revised wording. I think the revised wording may have a psychologically less suggestion of duplication. That is the reason for the change.

I did want the record to show we do not suggest what we have conceived to be any change of the substantive law. We do feel very decidedly that legal authority should be preserved for use in emergency that may never happen, but against which we should be prepared.

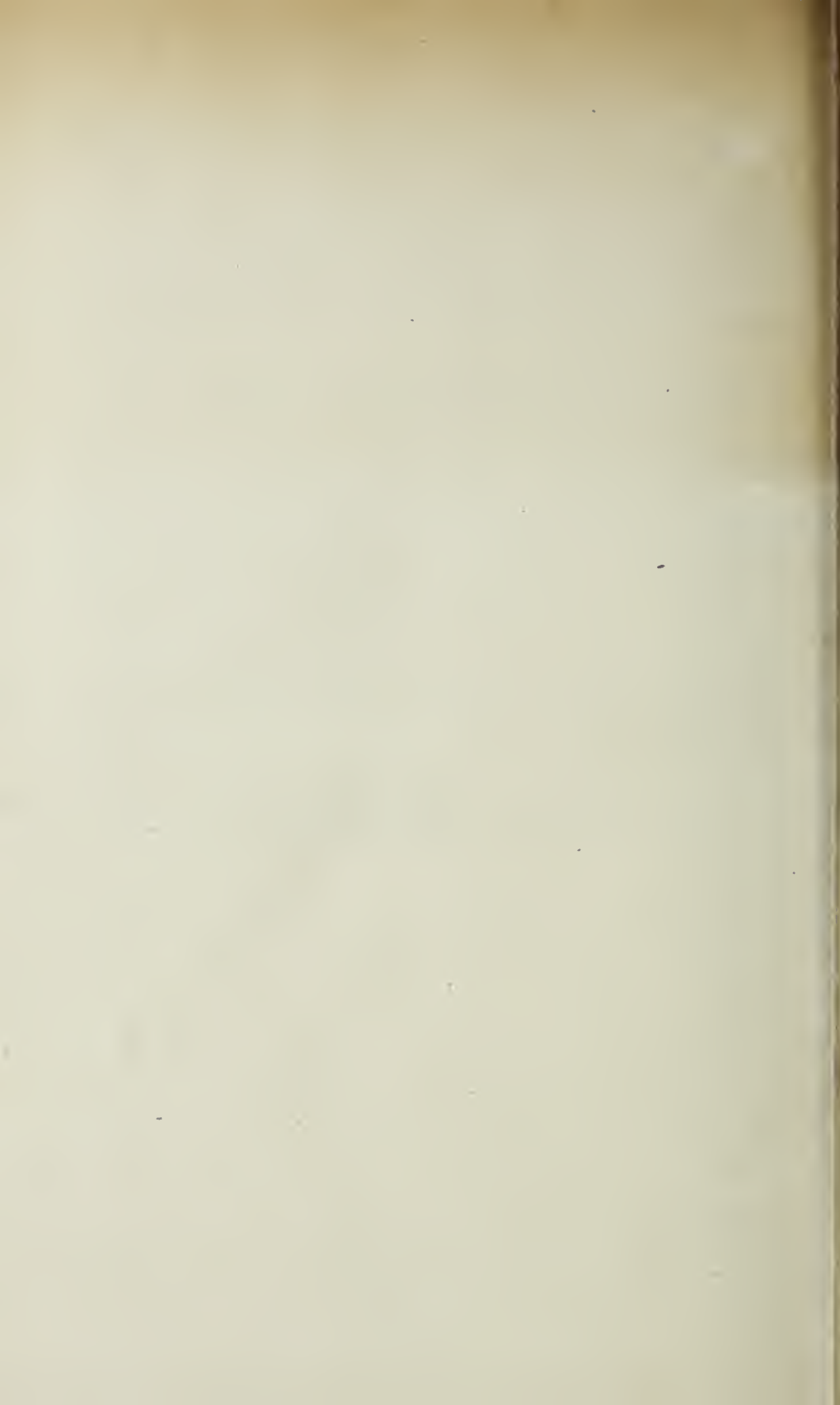
Senator WEEKS. If there are no other witnesses, we will adjourn now.

Thank you very much for your help.

(Whereupon, at 12 o'clock noon, the committee adjourned.)

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United States  
of America

# Congressional Record

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## Senate

(Legislative day of Tuesday, May 9, 1944)

The Senate met at 12 o'clock meridian, on the expiration of the recess.

The Chaplain, Rev. Frederick Brown Harris, D. D., offered the following prayer:

O God, whose spirit searcheth all things and whose love beareth all things, for this hallowed moment turning from our divisive loyalties and our party cries we would bow humbly in a unity of spirit, realizing our oneness in Thee. In the sincerity and truth with which we deeply desire to open our hearts to Thee, so we would broaden our sympathies with our brothers, Thy other children.

Forgive us for praying that Thy kingdom might come and then, by our own selfish stubbornness, barring the way when it has sought to come through us. Deliver us from the hypocrisy of giving lip service to the golden goals of Thy kingdom as if we looked for it without in others and not in our own hearts. Grant us a fundamental fealty to the common good, expressing itself in divergent attitudes and convictions which are the glory of our national heritage, yet putting above all partisan advantage the weal and welfare of the commonwealth to which we solemnly pledge our supreme allegiance. With the wrecks of nations which have broken Thy law of love smoking in ruins before our eyes, let the purifying stream of Thy mercy cleanse our national life lest our destruction be determined and we go the way of the nations that have forgotten God. We ask it in the dear Redeemer's name. Amen.

### THE JOURNAL

On request of Mr. BARKLEY, and by unanimous consent, the reading of the Journal of the proceedings of the calendar day Tuesday, June 20, 1944, was dispensed with, and the Journal was approved.

### CORRECTION OF A VOTE

Mr. BUTLER. Mr. President, yesterday when the vote was taken on the so-called Russell amendment, as recorded on page 6343 of the CONGRESSIONAL RECORD, I voted "nay." I was then called to the telephone, so I was not on the Senate floor when the names of Senators who voted were read by the clerk

in the recapitulation of the vote. Not until later did I discover that an error had been made, and that my name had been omitted as one of those voting in the negative. I then spoke to the clerk, and the Journal has been properly corrected. I now ask that the permanent RECORD be corrected so as to show that I voted "nay."

The ACTING PRESIDENT pro tempore (Mr. GILLETTE). The RECORD will be so corrected.

STATEMENT BY OLIVER LYTTELTON,  
BRITISH MINISTER OF PRODUCTION

Mr. LUCAS. Mr. President, from the time of our entry into the war and even before I supported measures on the floor of the Senate which I thought were helpful to the people of England in their struggle for liberty. At no time during this world crisis have I ever raised my voice against any military or naval strategy; neither have I joined issue with any man in the diplomatic corps or the Parliament or any man high in public life in England upon any statement that has been made. In fact, what I have said has always been in praise of the English people in their battle against tyranny.

But, Mr. President, sometimes circumstances alter all occasions. On last evening when I read in the press the statement made by Oliver Lyttelton, the British Minister of Production, I confess that I was not only shocked but greatly disappointed to learn that a man standing so high in the official life of Britain could make such a miserable mistake.

Oliver Lyttelton, in speaking before the Chamber of Commerce of America, said in his original remarks that—

Japan was provoked into attacking the United States at Pearl Harbor. It is a travesty on history ever to say that America was forced into the war.

Mr. President, regardless of any correction or additional interpretation, regardless of the fact that Mr. Lyttelton may say that what he said was a matter of expression and not of intention, the original words will cling to all peace-loving Americans as one of the most incredible and stupefying statements that have been uttered by any man high in public life of the Allied Nations. Any-

one who has the slightest knowledge of oriental history knows that Japan deliberately prepared herself for world conquest. She planned to attack this country and did, just as she planned to, and attacked other countries in the past. She knew that under no circumstances would we make unjustifiable concessions to her in the southwest Pacific and the Far East which might imperil our security in the years to come.

Had the statement of Mr. Lyttelton originated from the bureaus of Axis propaganda, we would have thought little or nothing of it. In fact, we might expect such utterances from radio Tokyo or radio Berlin. It is the job of the Axis propagandists to probe for a weak spot or a soft spot in American emotion. We all know that the only hope of the Nazis and the Japs is to divide and conquer. It is with the deepest regret that I am constrained to say that the statement made by Oliver Lyttelton strikes a hard blow at unity which is so vital to a complete and early victory. What Lyttelton said must have given Hitler and Tojo renewed hope in their desperate attempt to exploit what little discontent there is in this country over the progress and conduct of the war.

Mr. President, I commend the Secretary of State, Cordell Hull, for his rebuke of Lyttelton for the ugly slur that was placed against this Nation, but as a United States Senator I go even further: I say that those who have control of the British Government at this hour cannot afford to permit such an irresponsible character to continue in high public office for the good of the Allied cause. For the sake of continued unity, for the sake of continued success on the battlefields and on the sea lanes of the world, in the interest of saving the lives of American boys, the resignation of Lyttelton should be requested.

### MESSAGE FROM THE PRESIDENT

A message in writing from the President of the United States was communicated to the Senate by Mr. Miller, one of his secretaries.

### MESSAGE FROM THE HOUSE

A message from the House of Representatives, by Mr. Maurer, one of its



reading clerks, announced that the House had receded from its amendment to the bill (S. 1588) for the relief of the legal guardian of Eugene Holcomb, a minor.

The message also announced that the House had severally agreed to the amendments of the Senate to the following bills of the House:

H. R. 2803. An act for the relief of O. W. James;

H. R. 2855. An act for the relief of the estate of John Buby;

H. R. 3102. An act for the relief of Mrs. Eva M. Delisle; and

H. R. 3661. An act for the relief of G. F. Allen, chief disbursing officer, Treasury Department, and for other purposes.

The message further announced that the House had severally agreed to the amendments of the Senate to the following bills of the House:

H. R. 272. An act for the relief of Mrs. Vola Stroud Pokluda, Jesse M. Knowles, and the estate of Lee Stroud;

H. R. 1220. An act for the relief of Paul J. Campbell, the legal guardian of Paul M. Campbell, a minor; and

H. R. 4115. An act to give honorably discharged veterans, their widows, and the wives of disabled veterans, who themselves are not qualified, preference in employment where Federal funds are disbursed.

The message also announced that the House had agreed to the report of the committee of conference on the disagreeing votes of the two Houses on the amendments of the Senate to the bill (H. R. 4183) making appropriations for the fiscal year ending June 30, 1945, for civil functions administered by the War Department, and for other purposes, and that the House receded from its disagreement to the amendment of the Senate numbered 7 to the bill, and concurred therein.

The message further announced that the House had receded from its disagreement to the amendment of the Senate numbered 10 to the bill (H. R. 4204) making appropriations for the Departments of State, Justice, and Commerce, for the fiscal year ending June 30, 1945, and for other purposes, and concurred therein with an amendment, in which it requested the concurrence of the Senate.

The message also announced that the House had agreed to the report of the committee of conference on the disagreeing votes of the two Houses on the amendments of the Senate to the bill (H. R. 4679) making appropriations for the Department of the Interior for the fiscal year ending June 30, 1945, and for other purposes; that the House receded from its disagreement to the amendments of the Senate numbered 39, 40, 41, 42, 82, 84, 88, 93, 94, 115, 169, 191, and 196 to the bill and concurred therein; that the House receded from its disagreement to the amendments of the Senate numbered 89, 116, 127, 128, 133, 138, 155, 202, and 203 to the bill and concurred therein severally with an amendment, in which it requested the concurrence of the Senate, and that the House receded from its disagreement to the amendments of the Senate numbered 156 and 166 to the bill and concurred therein each with amendments, in which it requested the concurrence of the Senate.

#### ENROLLED BILL SIGNED

The message further announced that the Speaker had affixed his signature to the enrolled bill (S. 1157) to amend section 61 of the National Defense Act of June 3, 1916, as amended, for the purpose of providing such training of State and Territorial military forces as is deemed necessary to enable them to execute their internal security responsibilities within their respective States and Territories, and it was signed by the Acting President pro tempore.

#### REPORTS OF COMMITTEES

The following reports of committees were submitted:

By Mr. McKELLAR, from the Committee on Post Offices and Post Roads:

H. R. 4215. A bill to extend to the custodial-service employees of the Post Office Department certain benefits applicable to postal employees; with an amendment (Rept. No. 1000).

By Mr. HATCH, from the Committee on Public Lands and Surveys:

H. R. 3524. A bill to provide for the establishment of the Harpers Ferry National Monument; without amendment (Rept. No. 1001);

H. R. 4095. A bill confirming the claim of Robert Johnson and other heirs of Monroe Johnson to certain lands in the State of Mississippi, county of Adams; with an amendment (Rept. No. 1002); and

S. Res. 311. Resolution increasing the compensation of the temporary clerk to the Committee on Public Lands and Surveys; without amendment, and, under the rule, the resolution was referred to the Committee to Audit and Control the Contingent Expenses of the Senate.

By Mr. GEORGE, from the Committee on Finance:

H. R. 4837. A bill to extend for an additional 2 years the suspension in part of the processing tax on coconut oil; with amendments (Rept. No. 1003); and

H. R. 4881. A bill to amend the Internal Revenue Code, the Narcotic Drug Import and Export Act, as amended, and the Tariff Act of 1930, as amended, to classify a new synthetic drug, and for other purposes; without amendment (Rept. No. 1004).

By Mr. WALSH of Massachusetts, from the Committee on Naval Affairs:

H. R. 4405. A bill to amend the act approved March 7, 1942 (56 Stat. 143), as amended (56 Stat. 1092; 50 App. U. S. C., Supp. III, 1001-1017, inclusive), so as to more specifically provide for pay, allotments, and administration pertaining to war casualties, and for other purposes; with amendments (Rept. No. 1005).

By Mr. WHERRY, from the Committee on Claims:

S. 1717. A bill for the relief of Luella F. Stewart; without amendment (Rept. No. 1006); and

S. 1995. A bill for the relief of Fred A. Dimler and Gwendolyn E. Dimler, his wife; without amendment (Rept. No. 1007).

By Mr. TUNNELL, from the Committee on Claims:

S. 1226. A bill for the relief of Charles T. Allen; with amendments (Rept. No. 1008);

H. R. 1963. A bill for the relief of G. H. Garner; with amendments (Rept. No. 1009);

H. R. 2965. A bill for the relief of Ross Engineering Co.; without amendment (Rept. No. 1010); and

H. R. 3929. A bill for the relief of Katherine Scherer; with an amendment (Rept. No. 1011).

By Mr. ROBERTSON, from the Committee on Claims:

H. R. 2151. A bill for the relief of Elizabeth Powers Long; without amendment (Rept. No. 1012);

H. R. 2333. A bill for the relief of Mrs. Samuel M. McLaughlin; without amendment (Rept. No. 1013);

H. R. 3481. A bill for the relief of J. William Ingram; without amendment (Rept. No. 1014); and

H. R. 4528. A bill for the relief of L. M. Feller Co. and Wendell C. Graus; without amendment (Rept. No. 1015).

By Mr. ELLENDER, from the Committee on Claims:

H. R. 2006. A bill for the relief of Mrs. Hagar Simpson, Mrs. Nat Price, Jr., and Griffin Bros. Clinic; with amendments (Rept. No. 1016);

H. R. 2530. A bill for the relief of John M. O'Connell; without amendment (Rept. No. 1017);

H. R. 3280. A bill for the relief of William Dyer; without amendment (Rept. No. 1018);

H. R. 3281. A bill for the relief of the estate of Nelson Hawkins; without amendment (Rept. No. 1019);

H. R. 3539. A bill for the relief of the estate of Carlos Pérez Avilés; without amendment (Rept. No. 1020);

H. R. 3586. A bill for the relief of Mrs. John Andrew Gordin; without amendment (Rept. No. 1021);

H. R. 3636. A bill for the relief of Josephine Guldoni; without amendment (Rept. No. 1022); and

H. R. 4197. A bill for the relief of Mr. and Mrs. John Cushman; without amendment (Rept. No. 1023).

By Mr. MALONEY (for Mr. WALSH of New Jersey), from the Committee on Commerce:

H. R. 4041. A bill to amend the act relating to the construction and maintenance of a bridge across the Missouri River at or near Nebraska City, Nebr.; without amendment (Rept. No. 1025).

By Mr. WALLGREN, from the Committee on Commerce:

H. R. 4935. A bill to provide for a study of multiple taxation of air commerce, and for other purposes; without amendment (Rept. No. 1026).

By Mr. THOMAS of Utah, from the Committee on Education and Labor:

H. R. 4624. A bill to consolidate and revise the laws relating to the Public Health Service, and for other purposes; with amendments (Rept. No. 1027).

#### ENROLLED BILLS PRESENTED

Mr. TRUMAN (for Mrs. CARAWAY), from the Committee on Enrolled Bills, reported that on June 19, 1944, that committee presented to the President of the United States the following enrolled bills:

S. 1479. An act providing for the suspension of certain requirements relating to work on tunnel sites; and

S. 1808. An act to authorize temporary appointment as officers in the Army of the United States of members of the Army Nurse Corps, female persons having the necessary qualifications for reappointments in such corps, female dietetic and physical therapy personnel of the Medical Department of the Army (exclusive of students and apprentices), and female persons having the necessary qualifications for appointment in such department as female dietetic or physical-therapy personnel, and for other purposes.

#### BILLS INTRODUCED

Bills were introduced, read the first time, and, by unanimous consent, the second time, and referred as follows:

By Mr. LUCAS:

S. 2029. A bill to provide for the planning of rural electrification projects, and for other purposes; to the Committee on Agriculture and Forestry.

By Mr. EASTLAND (for Mr. McCARRAN):  
S. 2030. A bill to improve the administration of justice by prescribing fair adminis-



CONSOLIDATION AND REVISION OF LAWS RELATING TO  
THE PUBLIC HEALTH SERVICE

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JUNE 21 (legislative day, MAY 9), 1944.—Ordered to be printed

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Mr. THOMAS of Utah, from the Committee on Education and Labor,  
submitted the following

## REPORT

[To accompany H. R. 4624]

The Committee on Education and Labor, to whom was referred the bill (H. R. 4624) to consolidate and revise the laws relating to the Public Health Service, and for other purposes, having considered the same, report favorably thereon with amendments and, as amended, recommend that the bill do pass.

The bill for the most part is merely a restatement of the laws relating to the Public Health Service.

It proposes to bring together, in a compact and orderly arrangement, substantially all existing law on the subject except obsolete provisions; to repeal obsolete laws; to resolve certain ambiguities in existing law; and to make a number of revisions which operating experience has shown to be necessary or desirable.

At the present time the laws applicable to the Public Health Service are the result of the accumulation, over a century and a half, of a great number of separate enactments. Since 1878, when the codification accomplished by the Revised Statutes was completed, there have been many further enactments, often consisting of isolated provisions in appropriation acts, bearing on the functions of the Public Health Service. Passed at different times, these provisions of law have generally neither expressly repealed nor expressly amended their predecessors, but have simply superimposed new duties and authorities on those already existing. Couched in different terms, frequently providing different procedures, they have led to serious inconsistencies and ambiguities, as well as to gaps and duplications in substantive authority to such an extent as to impede the efficient discharge by the Service of its responsibilities. The number and volume of these enactments is indicated by the fact that the repealing section occupies over 14 pages of the present bill.

At the time of its consideration last year of the bill which became the Public Health Service Act of 1943 (Public Law 184, 78th Cong.), the committee recognized the unsatisfactory state of the law regarding the Public Health Service. The need for prompt action on that measure, in order to enable the Service better to meet its wartime responsibilities, precluded any substantial revision of existing law in connection with that bill. At the instance of the committee, however, work was begun upon a comprehensive bill which would substitute for the existing mass of uncorrelated legislation a compact and logically arranged law governing the Public Health Service. In October 1943, H. R. 3379 was introduced to accomplish this purpose. Hearings on that bill were commenced on March 1 and concluded on March 14, 1944. As a result of further study, since the introduction of the bill, of suggestions made at the hearing, and especially of the enactment in November of the Public Health Service Act of 1943, many changes in the bill were found to be necessary. The present bill (H. R. 4624) incorporates these changes.

Enactment of the bill is recommended by the Federal Security Agency and by the president of the Association of State and Territorial Health Officers. No witness at the hearing opposed it, or urged more than minor amendments.

The bill consists of six titles. The first contains the short title and definitions, and the second deals with the organization, administration, and personnel of the Public Health Service. The third title contains the basic operating authority of the Service, and is subdivided into seven parts, dealing, respectively, with research and investigations, Federal-State cooperation, hospitals and medical examinations and medical care, lepers, narcotic addicts, biological products, and quarantine and inspection. The fourth title continues the existence and functions of the National Cancer Institute. Title V contains miscellaneous provisions of a permanent nature, while title VI, which would not be a part of the Public Health Service Act, contains certain temporary provisions and amendments of certain other statutes, as well as the repeal of the existing provisions of law relating to the Public Health Service.

Large portions of the bill consist merely of reenactment of existing legislation with minor textual changes proposed in the interest of clarity and consistency. In some fields, however, the inadequacies of present law have necessitated a complete rewriting. In the process of clarification some doubtful authorities would be confirmed, and in a few instances, where administrative experience has shown the need for it, wholly new authority would be conferred.

The bill does not include the subject matter of the so-called Nurse Training Act (Public Law 74, 78th Cong., as amended), because that act will by its own terms expire with the termination of hostilities in the present war. As it is a separate and self-contained enactment there is no need to incorporate it in even the temporary provisions of the bill.

The report of the Committee on Interstate and Foreign Commerce of the House of Representatives (Rept. No. 1364) contains the full explanation of the provisions of the bill as it was reported by that committee, and also a detailed statement of those changes in existing law which are effected in the process of consolidation.

AMENDMENTS RECOMMENDED BY THE COMMITTEE ON EDUCATION AND  
LABOR

The amendments recommended by your committee are as follows:

1. Page 8, line 22, insert "nursing," after "pharmacy,".
2. Page 14, lines 8 and 9, strike out "after not more than two years of service" and insert in lieu thereof "in accordance with regulations of the President".
3. Page 22, lines 2 and 3, strike out "allotments from their pay by commissioned officers,".
4. Page 29, after line 15 and before line 16, insert the following:

(b) To enable the Surgeon General to carry out the purposes of section 301 with respect to developing more effective measures for the prevention, treatment, and control of tuberculosis, and to assist, through grants and as otherwise provided in this section, States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate measures for the prevention, treatment, and control of such disease, including the provision of appropriate facilities for care and treatment and including the training of personnel for State and local health work, and to enable him to prevent and control the spread of tuberculosis in interstate traffic, and to meet the cost of pay, allowances, and traveling expenses of commissioned officers and other personnel of the Service detailed to assist in carrying out the purposes of this section with respect to tuberculosis, and to administer this section with respect to such disease, there is hereby authorized to be appropriated for the fiscal year ending June 30, 1945, the sum of \$10,000,000, and for each fiscal year thereafter a sum sufficient to carry out the purposes of this subsection.

5. Page 29, line 16, change "(b)" to "(c)".
6. Page 30, line 7, change "(c)" to "(d)".
7. Page 30, line 9, strike out "and" and insert in lieu thereof a comma.
8. Page 30, line 10, insert, after "(b)", ", and, within the limits specified in subsection (c), the total sum from the appropriation under that subsection".
9. Page 30, line 15, insert, after "disease problem", the following: ", the size of the tuberculosis problem,".
10. Page 30, line 20, change "(d)" to "(e)".
11. Page 31, line 7, change "(e)" to "(f)".
12. Page 31, line 9, change "or" to a comma and insert, after "(b)", the following: ", or subsection (c)".
13. Page 31, line 13, change "(f)" to "(g)".
14. Page 31, line 17, change "(g)" to "(h)".
15. Page 31, line 20, change "or" to a comma.
16. Page 31, line 21, after "(b)", insert "or subsection (c),".
17. Page 31, line 24, change "(e)" to "(f)".
18. Page 32, line 11, change "(h)" to "(i)".
19. Page 32, line 17, change "(i)" to "(j)".
20. Page 32, lines 17 and 18, strike out "of this section" and insert in lieu thereof "and funds appropriated under subsection (b)".
21. Page 32, line 20, change "such subsection" to "the respective subsections".
22. Page 32, line 24, change "such subsection" to "the respective subsections".
23. Page 33, line 17, insert, after the semicolon:

and from time to time, with the approval of the President, select suitable sites for and establish such additional institutions, hospitals, and stations in the States and possessions of the United States as in his judgment are necessary to enable the Service to discharge its functions and duties;



## 24. Page 39, strike out lines 9 and 10 and substitute the following:

Such cost shall be at such uniform rate as may be prescribed from time to time by the President for the hospitalization of dependents of naval and Marine Corps personnel at any naval hospital, pursuant to section 2 of the Act of May 10, 1943 (57 Stat. 80).

## 25. Page 44, line 2, insert the following sentence before "Whenever":

When sentence is pronounced against any person whom the prosecuting officer believes to be an addict, such officer shall report to the authority vested with the power to designate the place of confinement the name of such person, the reasons for his belief, all pertinent facts bearing on such addiction, and the nature of the offense committed.

## 26. Page 47, line 17, change "(d)" to "(c)".

## 27. Page 47, line 24, change "(c)" to "(d)".

## 28. Page 51, line 6, insert "and", before "potency", and strike out "and efficaciousness".

## 29. Page 52, strike out lines 4 through 10 and substitute the following:

(g) Nothing contained in this Act shall be construed as in any way affecting, modifying, repealing, or superseding the provisions of the Federal Food, Drug, and Cosmetic Act (U. S. C., 1940 edition, title 21, ch. 9).

## 30. Page 57, line 11, strike out "Any" and insert in lieu thereof "Except as otherwise prescribed in regulations, any".

## 31. Page 58, line 16, insert a comma after "this section".

## 32. Page 59, line 3, strike out "or may be" and insert a period in lieu thereof.

## 33. Page 59, strike out lines 4 through 6.

## 34. Page 59, at the end of line 15, insert the following:

The certificate required by this subsection shall be procurable from the quarantine officer, upon arrival of the vessel at the quarantine station and satisfactory inspection thereof, at any time within which quarantine services are performed at such station.

## 35. Page 59, line 18, strike out "civil".

## 36. Page 59, line 19, strike out "civil".

## 37. Page 60, line 9, strike out "364 or section".

## 38. Page 60, line 10, strike out the comma, after "thereunder", and change "367" to "364".

## 39. Page 61, after line 9 and before line 10, insert the following:

## PART H—TRAINING

## TRAINING OF NURSES

SEC. 371. The Surgeon General is authorized to provide for training and instruction of persons in nursing and related subjects, in educational and other training institutions which have been approved by the Surgeon General as meeting standards prescribed by regulations of the President; payment for such training and instruction, and for tuition, fees and subsistence, to be made through certification from time to time by the Surgeon General, in accordance with regulations of the President, to the Secretary of the Treasury of the name of the approved institution and the amount to be paid; and the Secretary shall make payment in accordance with such certification prior to audit or settlement by the General Accounting Office.

## 40. Page 65, line 25, change "(1)" to "(a)".

## 41. Page 66, line 4, change "(2)" to "(b)".

42. Page 68, after line 14 and before line 15, insert the following:

(e) Donations of \$50,000 or over in aid of research may be acknowledged by the establishment within the National Institute of Health of suitable memorials to the donors.

43. Page 79, strike out lines 1 through 10 and substitute:

(b) Subject to regulations of the President, lightkeepers, assistant lightkeepers, and officers and crews of vessels of the former Lighthouse Service, including any such persons who subsequent to June 30, 1939, have involuntarily been assigned to other civilian duty in the Coast Guard, who were entitled to medical relief at hospitals and other stations of the Public Health Service prior to enactment of this Act, and who are now or hereafter on active duty or who have been or may hereafter be retired under the provisions of section 6 of the Act of June 20, 1918, as amended (U. S. C., 1940 edition, title 33, sec. 763), shall be entitled to medical surgical, and dental treatment and hospitalization at hospitals and other stations of the Public Health Service: *Provided*, That such persons while on active duty shall also be entitled to care and treatment in accordance with the provisions of section 322 (e) of this Act.

44. Page 79, after line 10 and before line 11, insert the following:

(c) For the duration of the present war and for six months thereafter, seamen employed on foreign-flag vessels which are owned or operated by citizens of the United States or by corporations incorporated under the law of the United States or of any State shall be entitled to the same benefits as are provided by section 322 (a) (1) for seamen employed on vessels of the United States.

45. Page 79, after line 13 and before line 14, insert the following:

The two paragraphs under the subheading "Marine-hospital establishment (customs:)" under the heading "Under the Treasury Department" in section 3689 in title XLI of the Revised Statutes of the United States;

46. Page 79, line 14, strike out "Section 3689 in title XLI, and" and change "sections" to "Sections".

47. Page 90, line 12, strike out "wherever they appear".

48. Page 90, line 13, strike out "the second sentence of" and insert "(2)" after "(b)".

49. Page 91, line 3, insert, before "chapter 180", "chapter 725, 49 Statutes at Large 1827, at page 1839;"

50. Page 92, line 20, insert, after "547", ", at page 548".

51. Page 93, line 17, strike out ", at".

52. Page 93, line 18, strike out "page 4".

#### EXPLANATION OF AMENDMENTS

Of the amendments recommended by your committee, the greater number are either self-explanatory or are merely mechanical corrections. Those which require further explanation are the following:

Amendments Nos. 1 and 39: The word "nursing" has been added to the list of subjects in which examinations may be given prior to appointment in the Regular Corps of the Public Health Service. The effect of this amendment will be to authorize the granting of commissions to nurses of the Public Health Service. The duties of these nurses are essentially similar to those of nurses in the Navy and Army. A large portion of the patients in public health hospitals are members of the Coast Guard and of the merchant marine service. These nurses feel they have been discriminated against by the lack of legal authority to give them commissions. The Surgeon General testified that he found it difficult to secure nurses to staff hospitals under his jurisdiction because of the more favorable opportunities offered by the military forces.

Section 371 on page 61 has been added to enable the Surgeon General, subject to future appropriations of the Congress, to assist in the training of nurses to meet the essential health needs of the Nation. As a wartime activity, the Public Health Service is conducting a large and very successful program of nurse training to provide the nurses urgently needed by the military forces, civilian hospitals, health agencies, and war industries. This program is limited to wartime. There will be need after the war, however, for Congress to give some assistance to promote standards of nurse education and to aid in the training of nurses for civilian health service. Moreover, we probably shall have after the war large demands for nursing care of our wounded. Testimony before your committee also underlined the need for training additional nurses to care for the psychiatric problems which have been brought to attention as a result of war.

The authorization contained in section 371 was endorsed by official representatives of the three national nursing organizations.

Amendments Nos. 4 to 22, inclusive: These amendments would incorporate in the bill the provisions of H. R. 4615, recently passed by the House of Representatives, to establish a program for the investigation and control of tuberculosis.

The purpose of the amendments is to enable the Surgeon General of the Public Health Service, first, to make studies, investigations, and demonstrations with respect to developing more effective measures of prevention, treatment, and control of tuberculosis; second, to assist States, counties, health districts, and other political subdivisions of States through State health authorities, in establishing and maintaining adequate measures for the prevention, treatment, and control of tuberculosis; third, to control the spread of tuberculosis in interstate traffic.

The amendments would authorize annual appropriations for studies in tuberculosis control, grants to States, control of tuberculosis in interstate traffic, and administrative expenses incurred in this program.

Payment to the States would be made on the basis of population, the size of the tuberculosis problem and financial need. State contributions would be required in accordance with the regulations of the Surgeon General. Approval of State plans would be required.

The problem of tuberculosis control is acute. Sixty thousand tuberculosis deaths occur each year in this country, one-half of which are among persons between 20 and 45 years of age. In the age group 15 to 35, tuberculosis is the principal cause of death. In the age group 20 to 34, 1 in every 6 deaths among white persons and 1 in every 3 deaths among Negroes is due to tuberculosis.

The facilities and personnel of local tuberculosis clinics are over-taxed. The armed forces induction and examining stations have refused and reported back to local health departments over 100,000 young men and women between 21 and 35 years of age. Over half of the States are unable to provide the necessary expert medical care and supervision for the treatment of these cases. Unless something is done to protect these persons against this insidious disease, young mothers and fathers and industrial workers will continue to contribute the major share of the deaths from tuberculosis each year.

If this bill were enacted, a real attack could be made on tuberculosis by, first, expanding small-film X-ray case-finding on a Nation-wide scale to the entire adult population; second, by providing facilities



and professional personnel throughout the country which are accessible to the major part of our population for supervision and treatment of ambulatory patients with early tuberculosis; and, third, by studies and investigations into newer methods of control of the disease. There is in particular an urgent need to study the effect on tuberculosis of some of the new chemotherapeutic agents, such as the sulfone derivatives. It will also be possible to make special studies of the application of electronics to the newly developed small-film equipment in order to simplify still further the method and increase its efficiency and decrease its already low cost.

Funds would be granted to State health authorities to assist them in establishing and improving local tuberculosis-control offices. At the present time 26 of the 48 States have no full-time tuberculosis-control officer and scarcely any professional personnel, clinic facilities, or field nursing services. Other States need to have their case-finding and follow-up programs greatly augmented in order to meet their local problems. Professional personnel will have to be trained for State and local work. Whenever possible, attempts would be made to use qualified persons who have recovered from tuberculosis and are ready to be rehabilitated. Graduates from the Cadet Nurse Corps will be a valuable source of new workers in the nursing aspects of the program.

Under present conditions the major share of the appropriations authorized would be used to control the spread of tuberculosis among war workers and their families who have migrated from one community to another, and are not eligible, because of State residence requirements, for clinic and sanatorium care. The States have requested Federal assistance for the care and hospital treatment of these tuberculous workers who have broken down on the job, and tuberculous members of the families of war workers. It is estimated that from six to seven million dollars will be needed during the coming year to meet this special problem.

Tuberculosis is one of those diseases which are important not only from a public-health standpoint, but also from an economic view. Once the disease has become actively advanced, the patient is disabled either continuously for a long period of time, or death intervenes. Early diagnosis and treatment is an economy to the family in which the disease occurs and to the community which must bear the burden of support if the family is broken up for long periods by disability, or permanently by death.

Tuberculosis is a preventable cause of death. Recent developments now make it possible within a few years' time to locate, at a moderate cost, practically every case of tuberculosis in the population. The importance of widespread use of mass radiography everywhere in the country cannot be overemphasized. Having found the cases, careful clinical study, medical supervision, and treatment must be provided for those needing such care. By these means we can stop the human and economic waste of chronic disability and premature and unnecessary deaths from tuberculosis in the United States.

Amendment No. 29: Section 351 (g) of the bill, as passed by the House of Representatives, provides that viruses, sera, toxins, anti-toxins, and analogous products, and the manufacturers thereof, licensed under section 351 (which is a reenactment of the Virus, Serum,

and Toxin Act of July 1, 1902), should be subject also to the provisions of the Federal Food, Drug, and Cosmetic Act, except for the licensing provision in section 505 of that act. While the controls exercised under the Virus, Serum, and Toxin Act have proved very effective in safeguarding these biological products, it is essential that the powers of the Federal Security Administrator under both statutes be preserved; particularly, that he have the power to recommend seizure under the Federal Food, Drug, and Cosmetic Act in the contingency that, despite all safeguards, a contaminated or otherwise dangerous product should reach the market.

The wording of this subsection as passed by the House of Representatives, however, has given rise to some concern on the part of the affected industry lest there be duplication in the day-to-day administration of the two statutes. The Federal Security Agency has expressed its earnest desire to avoid such a result, and has assured your committee that it will not depart from the established administrative pattern unless in case of emergency. The Agency has acquiesced in the proposed change of language with a view to meeting this concern of the industry without weakening the legal controls now available to the Administrator.

○

Calendar No. 1045

78TH CONGRESS  
2D SESSION

# H. R. 4624

[Report No. 1027]

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## IN THE SENATE OF THE UNITED STATES

MAY 23 (legislative day, MAY 9), 1944

Read twice and referred to the Committee on Commerce

JUNE 16 (legislative day, MAY 9), 1944

The Committee on Commerce discharged, and referred to the Committee on  
Education and Labor

JUNE 21 (legislative day, MAY 9), 1944

Reported by Mr. THOMAS of Utah, with amendments

[Omit the part struck through and insert the part printed in italic]

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## AN ACT

To consolidate and revise the laws relating to the Public Health  
Service, and for other purposes.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       TITLE I—SHORT TITLE AND DEFINITIONS

4                               SHORT TITLE

5       SECTION 1. Titles I to V, inclusive, of this Act may be  
6       cited as the "Public Health Service Act".

7                               DEFINITIONS

8       SEC. 2. When used in this Act—



1       (a) The term "Service" means the Public Health  
2 Service;

3       (b) The term "Surgeon General" means the Surgeon  
4 General of the Public Health Service;

5       (c) The term "Administrator" means the Federal Se-  
6 curity Administrator;

7       (d) The term "regulations", except when otherwise  
8 specified, means rules and regulations made by the Surgeon  
9 General with the approval of the Administrator;

10       (e) The term "executive department" means any execu-  
11 tive department, agency, or independent establishment of  
12 the United States or any corporation wholly owned by the  
13 United States;

14       (f) The term "State" means a State or the District of  
15 Columbia, Hawaii, Alaska, Puerto Rico, or the Virgin  
16 Islands, except that as used in section 361 (d) such term  
17 means a State, the District of Columbia, or Alaska;

18       (g) The term "possession" includes, among other pos-  
19 sessions, Puerto Rico and the Virgin Islands;

20       (h) The term "seamen" includes any person employed  
21 on board in the care, preservation, or navigation of any  
22 vessel, or in the service, on board, of those engaged in  
23 such care, preservation, or navigation;

24       (i) The term "vessel" includes every description of  
25 watercraft or other artificial contrivance used, or capable of

1 being used, as a means of transportation on water, exclusive  
2 of aircraft and amphibious contrivances:

3 (j) The term "habit-forming narcotic drug" or "nar-  
4 cotic" means opium and coca leaves and the several alkaloids  
5 derived therefrom, the best known of these alkaloids being  
6 morphia, heroin, and codeine, obtained from opium, and  
7 cocaine derived from the coca plant; all compounds, salts,  
8 preparations, or other derivatives obtained either from the  
9 raw material or from the various alkaloids; Indian hemp and  
10 its various derivatives, compounds, and preparations, and  
11 peyote in its various forms; and

12 (k) The term "addict" means any person who habitu-  
13 ally uses any habit-forming narcotic drug so as to endanger  
14 the public morals, health, safety, or welfare, or who is or  
15 has been so far addicted to the use of such habit-forming  
16 narcotic drugs as to have lost the power of self-control with  
17 reference to his addiction.

## 18 TITLE II—ADMINISTRATION

### 19 PUBLIC HEALTH SERVICE

20 SEC. 201. The Public Health Service in the Federal  
21 Security Agency shall be administered by the Surgeon Gen-  
22 eral under the supervision and direction of the Administrator.

### 23 ORGANIZATION

24 SEC. 202. The Service shall consist of (1) the Office of  
25 the Surgeon General, (2) the National Institute of Health,

1 (3) the Bureau of Medical Services, and (4) the Bureau of  
2 State Services. The Surgeon General is authorized and di-  
3 rected to assign to the Office of the Surgeon General, to  
4 the National Institute of Health, to the Bureau of Medical  
5 Services, and to the Bureau of State Services, respectively,  
6 the several functions of the Service, and to establish within  
7 them such divisions, sections, and other units as he may find  
8 necessary; and from time to time abolish, transfer, and con-  
9 solidate divisions, sections, and other units and assign their  
10 functions and personnel in such manner as he may find  
11 necessary for efficient operation of the Service. No division  
12 shall be established, abolished, or transferred, and no divisions  
13 shall be consolidated, except with the approval of the Admin-  
14 istrator. The National Institute of Health shall be adminis-  
15 tered as a part of the field service. The Surgeon General  
16 may delegate to any officer or employee of the Service such  
17 of his powers and duties under this Act, except the making  
18 of regulations, as he may deem necessary or expedient

19

## COMMISSIONED CORPS

20 SEC. 203. There shall be in the Service a commissioned  
21 Regular Corps and, for the purpose of securing a reserve  
22 for duty in the Service in time of national emergency, a  
23 Reserve Corps. All commissioned officers shall be citizens  
24 and shall be appointed without regard to the civil-service  
25 laws and compensated without regard to the Classification



1 Act of 1923, as amended. Commissioned officers of the  
2 Reserve Corps shall be appointed by the President and  
3 commissioned officers of the Regular Corps shall be ap-  
4 pointed by him by and with the advice and consent of the  
5 Senate. Commissioned officers of the Reserve Corps shall  
6 at all times be subject to call to active duty by the Surgeon  
7 General, including active duty for the purpose of training  
8 and active duty for the purpose of determining their fitness  
9 for appointment in the Regular Corps. All active service  
10 in the Reserve Corps, as well as service in the Regular  
11 Corps, shall be credited for the purpose of promotion in the  
12 Regular Corps.

13 SURGEON GENERAL

14 SEC. 204. The Surgeon General shall be appointed  
15 from the Regular Corps for a four-year term by the Presi-  
16 dent by and with the advice and consent of the Senate.  
17 Upon the expiration of such term the Surgeon General,  
18 unless reappointed, shall revert to the grade and number in  
19 the Regular Corps that he would have occupied had he not  
20 served as Surgeon General.

21 DEPUTY SURGEON GENERAL AND ASSISTANT SURGEONS

22 GENERAL

23 SEC. 205. (a) The Surgeon General shall assign one  
24 commissioned officer from the Regular Corps to administer  
25 the Office of the Surgeon General, to act as Surgeon General

1 during the absence or disability of the Surgeon General or  
2 in the event of a vacancy in that office, and to perform such  
3 other duties as the Surgeon General may prescribe, and while  
4 so assigned he shall have the title of Deputy Surgeon General.

5 (b) The Surgeon General shall assign six commissioned  
6 officers from the Regular Corps to be, respectively, the  
7 Director of the National Institute of Health, the Chief of the  
8 Bureau of State Services, the Chief of the Bureau of Medical  
9 Services, the Chief Medical Officer of the United States  
10 Coast Guard, the Chief Dental Officer of the Service, and  
11 the Chief Sanitary Engineering Officer of the Service, and  
12 while so serving they shall each have the title of Assistant  
13 Surgeon General.

14 (c) The Surgeon General shall designate the Assistant  
15 Surgeon General who shall serve as Surgeon General in case  
16 of absence or disability, or vacancy in the offices, of both the  
17 Surgeon General and the Deputy Surgeon General.

18 GRADES, RANKS, AND TITLES OF THE COMMISSIONED CORPS

19 SEC. 206. (a) The Surgeon General, during the period  
20 of his appointment as such, shall be of the same grade, with  
21 the same pay and allowances, as the Surgeon General of the  
22 Army; and the Deputy Surgeon General and Assistant Sur-  
23 geons General, while assigned as such, shall have the grade  
24 corresponding with the grade of Brigadier General, with  
25 the same pay and allowances. The grades of commissioned

1 officers of the Service shall correspond with grades of officers  
2 of the Army as follows:

- 3 (1) Officers of the director grade—colonel;
- 4 (2) Officers of the senior grade—lieutenant colonel;
- 5 (3) Officers of the full grade—major;
- 6 (4) Officers of the senior assistant grade—captain;
- 7 (5) Officers of the assistant grade—first lieutenant;

8 and

- 9 (6) Officers of the junior assistant grade—second  
10 lieutenant.

11 (b) The titles of medical officers of the foregoing grades  
12 shall be respectively (1) medical director, (2) senior sur-  
13 geon, (3) surgeon, (4) senior assistant surgeon, (5)  
14 assistant surgeon, and (6) junior assistant surgeon. The  
15 President is authorized to prescribe titles, appropriate to the  
16 several grades, for commissioned officers of the Service other  
17 than medical officers. All titles of the officers of the Reserve  
18 Corps shall have the suffix "Reserve".

#### 19 SPECIAL TEMPORARY POSITIONS

20 SEC. 207. (a) When necessary for the accomplishment  
21 of important temporary work in time of war, or of emergency  
22 proclaimed by him, the President may establish special tem-  
23 porary positions in the Service and prescribe grades which  
24 shall be applicable to officers during periods they are as-  
25 signed to such positions. While assigned to any such posi-



tion an officer shall receive the pay and allowances applicable to the grade so prescribed. Not more than three such positions existing at any one time shall have the grade of Assistant Surgeon General. The Surgeon General shall assign commissioned officers to such positions.

(b) Commissioned officers and qualified technical or professional noncommissioned personnel may be assigned by the Surgeon General to be chiefs of administrative units. Such assignments shall not affect the pay of commissioned officers so assigned, except that when any commissioned officer below the grade of director is assigned to serve as chief of a division such officer during the period so assigned shall have the temporary grade and receive the pay and allowances applicable to the director grade.

#### APPOINTMENT OF PERSONNEL

SEC. 208. (a) (1) Except as provided in subsection (b) of this section, original appointments to the Regular Corps may be made only in the junior assistant, assistant, and senior assistant grades and original appointments to a grade above junior assistant shall be made only after passage of an examination, given in accordance with regulations of the President, in one or more of the several branches of medicine, surgery, dentistry, hygiene, sanitary engineering, pharmacy, nursing, or related scientific specialties in the field of public health.

1       (2) Original appointments to the Reserve Corps may  
2 be made to any grade up to and including the director grade  
3 but only after passage of an examination given in accordance  
4 with regulations of the President. Reserve commissions shall  
5 be for a period of not more than five years and any such com-  
6 mission may be terminated by the President at any time,  
7 in his discretion.

8       (b) Whenever commissioned officers of the Service are  
9 not available for the performance of permanent duties re-  
10 quiring highly specialized training and experience in special  
11 fields related to public health, the Administrator on recom-  
12 mendation of the Surgeon General shall report that fact to  
13 the President and the President is authorized to appoint, by  
14 and with the advice and consent of the Senate, not to exceed  
15 three persons in any one fiscal year to grades in the Regular  
16 Corps of the Service above that of senior assistant, but not  
17 to a grade above that of director; and for purposes of pay and  
18 pay period any person appointed under the provisions of this  
19 section shall be considered as having had on the date of ap-  
20 pointment service equal to that of the junior officer of the  
21 grade to which appointed.

22       (c) In accordance with regulations, special consultants  
23 may be employed to assist and advise in the operations of the  
24 Service. Such consultants may be appointed without regard

1 to the civil-service laws and their compensation may be fixed  
2 without regard to the Classification Act of 1923, as amended.

3 (d) In accordance with regulations, individual scientists,  
4 other than commissioned officers of the Service, may be des-  
5 ignated by the Surgeon General to receive fellowships, ap-  
6 pointed for duty with the Service without regard to the  
7 civil-service laws and compensated without regard to the  
8 Classification Act of 1923, as amended, may hold their fel-  
9 lowships under conditions prescribed therein, and may be  
10 assigned for studies or investigations either in this country  
11 or abroad during the terms of their fellowships.

12 (e) Persons who are not citizens may be employed as  
13 consultants pursuant to subsection (c) and may be appointed  
14 to fellowships pursuant to subsection (d). Unless other-  
15 wise specifically provided, any prohibition in any other Act  
16 against the employment of aliens, or against the payment  
17 of compensation to them, shall not be applicable in the case  
18 of persons employed or appointed pursuant to such subsec-  
19 tions.

20 (f) The appointment of any officer or employee of the  
21 Service made in accordance with the civil-service laws shall  
22 be made by the Administrator, and may be made effective  
23 as of the date on which such officer or employee enters upon  
24 duty.



## PAY AND ALLOWANCES

SEC. 209. (a) Commissioned officers of the Regular Corps shall receive such pay and allowances as are or may hereafter be provided by law.

(b) Reserve officers shall receive the same pay and allowances when on active duty as commissioned officers of the Regular Corps, including allowances for travel and transportation of household goods and effects.

(c) In accordance with regulations of the President, commissioned officers of the Regular Corps and officers of the Reserve on active duty may make allotments from their pay and may be granted leaves of absence without any deduction from their pay. Such officers shall also be permitted to purchase quartermaster supplies from the Army, Navy, and Marine Corps at the same price as is charged officers of the Army, Navy, and Marine Corps.

(d) Female commissioned officers of the Service shall receive the same pay and allowances as male officers of corresponding grades, including allowances for dependents, except that no allowance shall be paid to any female commissioned officer on account of any dependent who is not in fact dependent upon such officer for his or her chief support. For the purposes of this subsection the term "dependent" shall include a husband, father, mother, and unmarried

1 children (including stepchildren and adopted children)  
2 under twenty-one years of age.

3 (e) Members of the National Advisory Health Council  
4 and members of the National Advisory Cancer Council, other  
5 than ex officio members, while attending conferences or  
6 meetings of their respective Councils or while otherwise serv-  
7 ing at the request of the Surgeon General, shall be entitled  
8 to receive compensation at a rate to be fixed by the Adminis-  
9 trator, but not exceeding \$25 per diem, and shall also be  
10 entitled to receive an allowance for actual and necessary  
11 traveling and subsistence expenses while so serving away  
12 from their places of residence.

13 (f) Field employees of the Service, except those em-  
14 ployed on a per diem or fee basis, who render part-time duty  
15 and are also subject to call at any time for services not  
16 contemplated in their regular part-time employment,  
17 may be paid annual compensation for such part-time duty  
18 and, in addition, such fees for such other services as the  
19 Surgeon General may determine; but in no case shall the  
20 total paid to any such employee for any fiscal year exceed  
21 the amount of the minimum annual salary rate of the classifi-  
22 cation grade of the employee.

23 (g) Whenever any commissioned or other officer or  
24 employee of the Service is assigned for duty which the  
25 Surgeon General finds requires intimate contact with persons

1 afflicted with leprosy, he may receive, as provided by regula-  
 2 tions of the President, in addition to the pay and any allow-  
 3 ances of his grade, not more than one-half the pay of  
 4 such grade, and such allowances or increased allowances  
 5 as may be provided for by such regulations.

6 (h) Individuals appointed under section 208 (d) shall  
 7 have included in their fellowships such stipends or allowances,  
 8 including travel and subsistence expenses, as the Surgeon  
 9 General may deem necessary to procure qualified fellows.

10 PROMOTIONS AND SEPARATION OF COMMISSIONED OFFICERS  
 11 IN THE REGULAR CORPS

12 SEC. 210. (a) Promotions of commissioned officers of  
 13 the Regular Corps to any grade up to and including the direc-  
 14 tor grade shall be made only after examination given in  
 15 accordance with regulations of the President and shall be  
 16 made according to the same length of service as is now or may  
 17 hereafter be prescribed for promotion of officers of correspond-  
 18 ing grades of the Medical Corps of the Army, except that—

19 (1) In time of war, or of national emergency pro-  
 20 claimed by the President, any commissioned officer of the  
 21 Regular Corps may be appointed to a higher temporary  
 22 grade with the pay and allowances thereof without  
 23 examination and without vacating his permanent  
 24 appointment, and, if his service shall have been con-  
 25 tinuous, without renewing his oath of office;



1           (2) For purposes of promotion, an officer whose  
2           original appointment to the Regular Corps was above  
3           the assistant grade shall be considered as having had on  
4           the date of such original appointment service equal to  
5           that of the junior officer of the grade to which he was  
6           appointed, except that if his active commissioned service  
7           in the Service exceeds that of the junior officer of the  
8           grade, such service (not exceeding ten years for an  
9           officer appointed in the senior assistant grade and four-  
10          teen years for an officer appointed in the full grade)  
11          shall be credited for purposes of promotion;

12           (3) Officers commissioned in the grade of junior  
13          assistant shall be examined for promotion ~~after not more~~  
14          ~~than two years of service~~ *in accordance with regulations*  
15          *of the President* and if qualified shall be promoted to the  
16          next higher grade; and

17           (4) Commissioned officers other than medical,  
18          dental, sanitary engineering, and pharmacist officers shall  
19          be promoted in accordance with regulations of the Presi-  
20          dent.

21           (b) At the end of his first three years of service, the  
22          record of each commissioned officer in the Regular Corps  
23          originally appointed in or above the grade of senior assistant  
24          shall be reviewed in accordance with regulations of the  
25          President and if found not fully qualified for further service

1 he shall be separated from the Service and paid six months'  
2 pay and allowances.

3 (c) When a commissioned officer in the Regular Corps  
4 is found, after examination, to be not qualified for promo-  
5 tion for reasons other than physical disability incurred in  
6 line of duty—

7 (1) If below the full grade he shall be separated  
8 from the Service, and if in the assistant grade he shall  
9 be separated and paid six months' pay and allowances,  
10 and if in the senior assistant grade he shall be separated  
11 and paid one year's pay and allowances; and

12 (2) If in the full or senior grade he shall be reported  
13 as not in line of promotion, or shall be retired and paid  
14 at the rate of  $2\frac{1}{2}$  per centum for each complete year of  
15 active commissioned service in the Service, but in no  
16 case to exceed 60 per centum of his active pay at the  
17 time he is retired.

18 RETIREMENT OF COMMISSIONED OFFICERS

19 SEC. 211. (a) A commissioned officer of the Regular  
20 Corps retired for disability from disease or injury incurred  
21 in line of duty, or a commissioned officer of the Reserve  
22 Corps retired for disability from disease or injury incurred  
23 in line of duty in time of war, shall be entitled, except as  
24 provided in subsection (c), to receive retired pay at the

1 rate of 75 per centum of his active pay at the time of  
2 retirement.

3 (b) A commissioned officer shall be retired on the first  
4 day of the month following his sixty-fourth birthday. If he  
5 is an officer in the Regular Corps, he shall, except as pro-  
6 vided in subsection (c), be entitled to receive retired pay  
7 at the rate of 75 per centum of his active pay at the time of  
8 retirement.

9 (c) (1) Any commissioned officer of the Regular  
10 Corps who at the time of his original appointment was more  
11 than forty-five years of age shall upon retirement, unless  
12 retired for disability from disease or injury incurred in time  
13 of war, be entitled to retired pay only at the rate of 4 per  
14 centum of his active pay at the time of retirement for each  
15 twelve months of active commissioned service, including  
16 any such service in the Army, Navy, or Coast Guard, but  
17 in no case more than 75 per centum of such active pay.

18 (2) The retired pay of any commissioned officer who  
19 has served four years or more as Surgeon General or Deputy  
20 Surgeon General shall be based on the pay of the highest  
21 grade held by him as such Surgeon General or Deputy  
22 Surgeon General.

23 (3) The retired pay of an officer of the Regular Corps  
24 who has failed, by reason of disability incurred in line of duty,



1 to receive a promotion to which he would otherwise have  
2 been entitled, shall be based on the pay of the grade to which,  
3 but for such disability, he would have been promoted.

4 (d) An officer retired for disability who is found to have  
5 recovered from his disability, and in time of war an officer  
6 who has been retired for age, may in accordance with regula-  
7 tions of the President be recalled to active duty.

8 (e) With the approval of the President a commissioned  
9 officer who has served four years or more as Surgeon General  
10 and who has had not less than twenty-five years of active  
11 commissioned service in the Service may retire voluntarily,  
12 either at the termination of his term as Surgeon General or  
13 at any time thereafter; and his retired pay shall be at the  
14 rate of 75 per centum of the pay of the highest grade held  
15 by him as such Surgeon General.

16 (f) Commissioned officers of the Reserve Corps, while on  
17 active duty, shall be deemed to be officers of the executive  
18 branch of the Government within the meaning of section 3  
19 of the Civil Service Retirement Act, as amended (U. S. C.,  
20 1940 edition, title 5, section 693).

21 MILITARY BENEFITS

22 SEC. 212. (a) For the purposes of this section—

23 (1) the term “full military benefits” means all  
24 rights, privileges, immunities, and benefits provided

1 under any law of the United States in the case of  
2 commissioned officers of the Army (including their sur-  
3 viving beneficiaries) on account of active military  
4 service, including, but not limited to, burial payments  
5 in the event of death, six months' pay in case of death,  
6 veterans' compensation and pensions and other veterans'  
7 benefits, the rights provided under the Soldiers' and  
8 Sailors' Civil Relief Act, as amended, and under the  
9 National Service Life Insurance Act, as amended, travel  
10 allowances, including per diem allowances for travel  
11 without regard to repeated travel between two or more  
12 places in the same vicinity, exemption from payment  
13 of postage on mail, exemption of certain pay  
14 from Federal income taxation, and other benefits,  
15 privileges and exceptions under the Internal Revenue  
16 laws; excluding, however, retired pay, uniform allow-  
17 ances, the right to be awarded military ribbons, medals,  
18 and decorations, and the benefits of the Mustering-out  
19 Payment Act of 1944, and excluding reemployment  
20 rights with respect to any commissioned officer of the  
21 Service except officers of the Reserve Corps called to  
22 active duty after November 11, 1943; and

23 (2) the term "limited military benefits" means  
24 full military benefits, except veterans' compensation and  
25 pensions and other veterans' benefits, and eligibility

1 under the National Service Life Insurance Act, as  
2 amended.

3 (b) Commissioned officers of the Service (including  
4 their surviving beneficiaries) —

5 (1) shall be entitled to limited military benefits  
6 with respect to all active service in time of war;

7 (2) shall be entitled to full military benefits with  
8 respect to active service performed while detailed for  
9 duty with the Army, Navy, or Coast Guard;

10 (3) shall be entitled to full military benefits with  
11 respect to active service outside the continental limits of  
12 the United States, or in Alaska, in time of war;

13 (4) shall be entitled to full military benefits with  
14 respect to active service performed while the Service is  
15 part of the military forces of the United States pursuant  
16 to executive order of the President.

17 (c) The authority vested by law in the War Depart-  
18 ment, the Secretary of War, or other officers of the War  
19 Department with respect to rights, privileges, immunities,  
20 and benefits referred to in subsection (a) shall be exercised,  
21 with respect to commissioned officers of the Service, by the  
22 Surgeon General under the supervision and direction of the  
23 Administrator.

24 (d) The President may prescribe the conditions under

1 which commissioned officers of the Service may be awarded  
2 military ribbons, medals, and decorations.

3 ALLOWANCES FOR UNIFORMS

4 SEC. 213. An allowance of \$250 for uniforms and equip-  
5 ment is authorized to be paid to each commissioned officer  
6 of the Service who is hereafter, in time of war, appointed to  
7 the Regular Corps or called to active duty in the Reserve  
8 Corps, or who is hereafter on active duty in either corps at  
9 the commencement of any war, if at such time the officer is  
10 in the grade of junior assistant, assistant, or senior assistant,  
11 and is receiving the pay of the first, second, or third pay  
12 period; except that no officer who has received such an  
13 allowance from the Service shall at any time thereafter be  
14 entitled to any further allowance.

15 DETAIL OF PERSONNEL

16 SEC. 214. (a) The Administrator is authorized, upon  
17 the request of the head of an executive department, to de-  
18 tail officers or employees of the Service to such department  
19 for duty as agreed upon by the Administrator and the head  
20 of such department in order to cooperate in, or conduct  
21 work related to, the functions of such department or of the  
22 Service. When officers or employees are so detailed their  
23 salaries and allowances may be paid from working funds  
24 established as provided by law or may be paid by the Service  
25 from applicable appropriations and reimbursement may be



1 made as agreed upon by the Administrator and the head of  
2 the executive department concerned. Officers detailed for  
3 duty with the Army, Navy, or Coast Guard shall be sub-  
4 ject to the laws for the government of the service to which  
5 detailed.

6 (b) Upon the request of any State health authority,  
7 personnel of the Service may be detailed by the Surgeon  
8 General for the purpose of assisting such State or a political  
9 subdivision thereof in work related to the functions of the  
10 Service.

11 (c) The Surgeon General may detail personnel of the  
12 Service to nonprofit educational, research, or other institu-  
13 tions engaged in health activities for special studies of scien-  
14 tific problems and for the dissemination of information  
15 relating to public health.

16 (d) Personnel detailed under subsections (b) and (c)  
17 shall be paid from applicable appropriations of the Service,  
18 except that, in accordance with regulations such personnel  
19 may be placed on leave without pay and paid by the State,  
20 subdivision, or institution to which they are detailed. The  
21 services of personnel while detailed pursuant to this section  
22 shall be considered as having been performed in the Service  
23 for purposes of longevity pay, promotion, retirement, com-  
24 pensation for injury or death, and the benefits provided by  
25 section 212.

## REGULATIONS

1  
2       SEC. 215. (a) The President shall from time to time  
3 prescribe regulations with respect to the appointment, pro-  
4 motion, retirement, termination of commission, titles, pay,  
5 uniforms, allowances (including increased allowances for  
6 foreign service), and discipline of the commissioned corps  
7 of the Service.

8       (b) The Surgeon General, with the approval of the  
9 Administrator, unless specifically otherwise provided, shall  
10 promulgate all other regulations necessary to the administra-  
11 tion of the Service, including regulations with respect to  
12 travel, transportation of household goods and effects, allot-  
13 ~~ments from their pay by commissioned officers~~, and uniforms  
14 for employees, and regulations with respect to the custody,  
15 use, and preservation of the records, papers, and property  
16 of the Service.

17       (c) No regulation relating to qualifications for appoint-  
18 ment of medical officers or employees shall give preference to  
19 any school of medicine.

## USE OF SERVICE IN EMERGENCY

20  
21       SEC. 216. In time of war, or of emergency pro-  
22 claimed by the President, he may utilize the Service to such  
23 extent and in such manner as shall in his judgment promote  
24 the public interest, and in time of war he may by Executive  
25 order declare the commissioned corps of the Service to be a

1 military service. Upon such declaration, and during the  
2 period of such war or such part thereof as the President shall  
3 prescribe, the commissioned corps (1) shall constitute a  
4 branch of the land and naval forces of the United States, and  
5 (2) to the extent prescribed by regulations of the President,  
6 shall be subject to the Articles of War and to the Articles for  
7 the Government of the Navy: *Provided*, That during such  
8 period or part thereof the commissioned corps shall continue  
9 to operate as part of the Service except to the extent that the  
10 President may direct as Commander in Chief.

11 NATIONAL ADVISORY HEALTH AND CANCER COUNCILS

12 SEC. 217. (a) The National Advisory Health Council  
13 shall consist of fourteen members. The Director of the Na-  
14 tional Institute of Health, and three experts, one each from  
15 the Army, the Navy, and the Bureau of Animal Industry, to  
16 be detailed by the Secretary of War, the Secretary of the  
17 Navy, and the Secretary of Agriculture, respectively, shall be  
18 ex officio members of the Council. The Surgeon General,  
19 with the approval of the Administrator, shall appoint, without  
20 regard to the civil-service laws, ten members of the Coun-  
21 cil who shall be persons, not otherwise in the employ of  
22 the United States, skilled in the sciences related to health.  
23 Each appointed member shall hold office for a term of  
24 five years, except that any member appointed to fill a  
25 vacancy occurring prior to the expiration of the term for

1 which his predecessor was appointed shall be appointed for  
2 the remainder of such term. An appointed member shall not  
3 be eligible to serve continuously for more than five years  
4 but shall be eligible for reappointment if he has not served  
5 immediately preceding his reappointment.

6 (b) The National Advisory Health Council shall advise,  
7 consult with, and make recommendations to, the Surgeon  
8 General on matters relating to health activities and functions  
9 of the Service. The Surgeon General is authorized to utilize  
10 the services of any member or members of the Council, and  
11 where appropriate, any member or members of the National  
12 Advisory Cancer Council in connection with matters related  
13 to the work of the Service, for such periods, in addition to  
14 conference periods, as he may determine.

15 (c) The National Advisory Cancer Council shall consist  
16 of the Surgeon General ex officio, who shall be Chairman, and  
17 of six members to be appointed without regard to the civil-  
18 service laws by the Surgeon General with the approval of the  
19 Administrator. The six appointed members shall be selected  
20 from leading medical or scientific authorities who are out-  
21 standing in the study, diagnosis, or treatment of cancer. Each  
22 appointed member shall hold office for a term of three years,  
23 except that any member appointed to fill a vacancy occurring  
24 prior to the expiration of the term for which his predecessor



1 was appointed shall be appointed for the remainder of such  
2 term. An appointed member shall not be eligible to serve  
3 continuously for more than three years but shall be eligible  
4 for reappointment if he has not served immediately preceding  
5 his reappointment.

6 TITLE III—GENERAL POWERS AND DUTIES OF  
7 PUBLIC HEALTH SERVICE

8 PART A—RESEARCH AND INVESTIGATIONS

9 IN GENERAL

10 SEC. 301. The Surgeon General shall conduct in the  
11 Service, and encourage, cooperate with, and render assistance  
12 to other appropriate public authorities, scientific institutions,  
13 and scientists in the conduct of, and promote the coordination  
14 of, research, investigations, experiments, demonstrations, and  
15 studies relating to the causes, diagnosis, treatment, control,  
16 and prevention of physical and mental diseases and impair-  
17 ments of man, including water purification, sewage treatment,  
18 and pollution of lakes and streams. In carrying out the fore-  
19 going the Surgeon General is authorized to—

- 20 (a) Collect and make available through publications  
21 and other appropriate means, information as to, and the  
22 practical application of, such research and other activities;  
23 (b) Make available research facilities of the Service

1 to appropriate public authorities, and to health officials  
2 and scientists engaged in special study;

3 (c) Establish and maintain research fellowships in  
4 the Service with such stipends and allowances, including  
5 traveling and subsistence expenses, as he may deem  
6 necessary to procure the assistance of the most brilliant  
7 and promising research fellows from the United States  
8 and abroad;

9 (d) Make grants in aid to universities, hospitals,  
10 laboratories, and other public or private institutions, and  
11 to individuals for such research projects as are recom-  
12 mended by the National Advisory Health Council, or,  
13 with respect to cancer, recommended by the National  
14 Advisory Cancer Council;

15 (e) Secure from time to time and for such periods  
16 as he deems advisable, the assistance and advice of  
17 experts, scholars, and consultants from the United States  
18 or abroad;

19 (f) For purposes of study, admit and treat at in-  
20 stitutions, hospitals, and stations of the Service, persons  
21 not otherwise eligible for such treatment; and

22 (g) Adopt, upon recommendation of the National  
23 Advisory Health Council, or, with respect to cancer,  
24 upon recommendation of the National Advisory Cancer

Council, such additional means as he deems necessary or appropriate to carry out the purposes of this section.

#### NARCOTICS

SEC. 302. (a) In carrying out the purposes of section 301 with respect to narcotics, the studies and investigations shall include the use and misuse of narcotic drugs, the quantities of crude opium, coca leaves, and their salts, derivatives, and preparations, together with reserves thereof, necessary to supply the normal and emergency medicinal and scientific requirements of the United States. The results of studies and investigations of the quantities of crude opium, coca leaves, or other narcotic drugs, together with such reserves thereof, as are necessary to supply the normal and emergency medicinal and scientific requirements of the United States, shall be reported not later than the 1st day of September each year to the Secretary of the Treasury, to be used at his discretion in determining the amounts of crude opium and coca leaves to be imported under the Narcotic Drugs Import and Export Act, as amended.

(b) The Surgeon General shall cooperate with States for the purpose of aiding them to solve their narcotic drug problems and shall give authorized representatives of the States the benefit of his experience in the care, treatment, and rehabilitation of narcotic addicts to the end that each State

1 may be encouraged to provide adequate facilities and methods  
2 for the care and treatment of its narcotic addicts.

3 PART B—FEDERAL-STATE COOPERATION

4 IN GENERAL

5 SEC. 311. The Surgeon General is authorized to accept  
6 from State and local authorities any assistance in the enforce-  
7 ment of quarantine regulations made pursuant to this Act  
8 which such authorities may be able and willing to provide.  
9 The Surgeon General shall also assist States and their political  
10 subdivisions in the prevention and suppression of communi-  
11 cable diseases, shall cooperate with and aid State and local  
12 authorities in the enforcement of their quarantine and other  
13 health regulations and in carrying out the purposes specified  
14 in section 314, and shall advise the several States on matters  
15 relating to the preservation and improvement of the public  
16 health.

17 HEALTH CONFERENCES

18 SEC. 312. A conference of the health authorities of the  
19 several States shall be called annually by the Surgeon Gen-  
20 eral. Whenever in his opinion the interests of the public  
21 health would be promoted by a conference, the Surgeon  
22 General may invite as many of such health authorities to con-  
23 fer as he deems necessary or proper. Upon the application  
24 of health authorities of five or more States it shall be the duty  
25 of the Surgeon General to call a conference of all State and



1 Territorial health authorities joining in the request. Each  
2 State represented at any conference shall be entitled to a  
3 single vote.

4 COLLECTION OF VITAL STATISTICS

5 SEC. 313. To secure uniformity in the registration of  
6 mortality, morbidity, and vital statistics the Surgeon General  
7 shall prepare and distribute suitable and necessary forms for  
8 the collection and compilation of such statistics which shall  
9 be published as a part of the health reports published by the  
10 Surgeon General.

11 GRANTS AND SERVICES TO STATES

12 SEC. 314. (a) To enable the Surgeon General to carry  
13 out the purposes of section 301 with respect to developing  
14 more effective measures for the prevention, treatment, and  
15 control of venereal diseases, and to assist, through grants and  
16 as otherwise provided in this section, States, counties, health  
17 districts, and other political subdivisions of the States in  
18 establishing and maintaining adequate measures for the pre-  
19 vention, treatment, and control of such diseases, including the  
20 training of personnel for State and local health work, and to  
21 enable him to prevent and control the spread of the venereal  
22 diseases in interstate traffic, and to meet the cost of pay,  
23 allowances, and traveling expenses of commissioned officers  
24 and other personnel of the Service detailed to assist in  
25 carrying out the purposes of this section with respect to the

1 venereal diseases, and to administer this section with respect  
2 to such diseases, there is hereby authorized to be appro-  
3 priated for each fiscal year a sum sufficient to carry out  
4 the purposes of this subsection.

5     **(b)** *To enable the Surgeon General to carry out the*  
6 *purposes of section 301 with respect to developing more*  
7 *effective measures for the prevention, treatment, and control*  
8 *of tuberculosis, and to assist, through grants and as other-*  
9 *wise provided in this section, States, counties, health districts,*  
10 *and other political subdivisions of the States in establishing*  
11 *and maintaining adequate measures for the prevention, treat-*  
12 *ment, and control of such disease, including the provision*  
13 *of appropriate facilities for care and treatment and includ-*  
14 *ing the training of personnel for State and local health*  
15 *work, and to enable him to prevent and control the spread*  
16 *of tuberculosis in interstate traffic, and to meet the cost of*  
17 *pay, allowances, and traveling expenses of commissioned*  
18 *officers and other personnel of the Service detailed to assist*  
19 *in carrying out the purposes of this section with respect to*  
20 *tuberculosis, and to administer this section with respect to*  
21 *such disease, there is hereby authorized to be appropriated*  
22 *for the fiscal year ending June 30, 1945, the sum of*  
23 *\$10,000,000, and for each fiscal year thereafter a sum suffi-*  
24 *cient to carry out the purposes of this subsection.*

25     ~~(b)~~ **(c)** *To enable the Surgeon General to assist, through*

1 grants and as otherwise provided in this section, States,  
 2 counties, health districts, and other political subdivisions of  
 3 the States in establishing and maintaining adequate public  
 4 health services, including grants for demonstrations and for  
 5 the training of personnel for State and local health work,  
 6 there is hereby authorized to be appropriated for each fiscal  
 7 year a sum not to exceed \$20,000,000. Of the sum appro-  
 8 priated for each fiscal year pursuant to this subsection there  
 9 shall be available an amount, not to exceed \$2,000,000, to  
 10 enable the Surgeon General to provide demonstrations and  
 11 to train personnel for State and local health work and to  
 12 meet the cost of pay, allowances, and traveling expenses  
 13 of commissioned officers and other personnel of the Service  
 14 detailed to assist States in carrying out the purposes of this  
 15 subsection.

16 ~~(e)~~ (d) For each fiscal year, the Surgeon General, with  
 17 the approval of the Administrator, shall determine the total  
 18 sum from the appropriation under subsection (a), ~~and~~ the  
 19 total sum from the appropriation under subsection (b), *and,*  
 20 *within the limits specified in subsection (c), the total sum*  
 21 *from the appropriation under that subsection* which shall be  
 22 available for allotment among the several States. He shall, in  
 23 accordance with regulations, from time to time make allot-  
 24 ments from such sums to the several States on the basis of (1)  
 25 the population, (2) the size of the venereal-disease problem,



1 *the size of the tuberculosis problem*, and the size of other  
2 special health problems, respectively, and (3) the financial  
3 need of the respective States. Upon making such allotments  
4 the Surgeon General shall notify the Secretary of the  
5 Treasury of the amounts thereof.

6     ~~(d)~~ (e) The Surgeon General, with the approval of the  
7 Administrator, shall from time to time determine the amounts  
8 to be paid to each State from the allotments to such State,  
9 and shall certify to the Secretary of the Treasury, the amounts  
10 so determined, reduced or increased, as the case may be, by  
11 the amounts by which he finds that estimates of required  
12 expenditures with respect to any prior period were greater  
13 or less than the actual expenditures for such period. Upon  
14 receipt of such certification, the Secretary of the Treasury  
15 shall, through the Division of Disbursement of the Treasury  
16 Department and prior to audit or settlement by the General  
17 Accounting Office, pay in accordance with such certification.

18     ~~(e)~~ (f) The moneys so paid to any State shall be ex-  
19 pended solely in carrying out the purposes specified in sub-  
20 section ~~(a)~~ (a), subsection (b), or subsection (c) of this  
21 section, as the case may be, and in accordance with plans  
22 presented by the health authority of such State and approved  
23 by the Surgeon General.

24     ~~(f)~~ (g) Money so paid shall be paid upon the condition  
25 that there shall be spent in such State for the same general



1 purpose from funds of such State and its political subdivisions  
2 an amount determined in accordance with regulations.

3 ~~(g)~~ (h) Whenever the Surgeon General, after reason-  
4 able notice and opportunity for hearing to the health authority  
5 of the State, finds that, with respect to money paid to the  
6 State out of appropriations under subsection ~~(a)~~ (a), sub-  
7 section (b), or subsection (c), as the case may be, there is  
8 a failure to comply substantially with either—

9 (1) the provisions of this section;

10 (2) the plan submitted under subsection ~~(e)~~ (f); or

11 (3) the regulations;

12 the Surgeon General shall notify such State health authority  
13 either that further payments will not be made to the State  
14 from appropriations under such subsection (or in his discre-  
15 tion that further payments will not be made to the State  
16 from such appropriations for activities in which there is such  
17 failure), until he is satisfied that there will no longer be any  
18 such failure. Until he is so satisfied the Surgeon General  
19 shall make no further certification for payment to such State  
20 from appropriations under such subsection, or shall limit  
21 payment to activities in which there is no such failure.

22 ~~(h)~~ (i) All regulations and amendments thereto with re-  
23 spect to grants to States under this section shall be made  
24 after consultation with a conference of the State health

1 authorities. Insofar as practicable, the Surgeon General shall  
 2 obtain the agreement of the State health authorities prior to  
 3 the issuance of any such regulations or amendments.

4 ~~(i)~~ (j) Funds appropriated under subsection (a) of  
 5 ~~this section~~ and funds appropriated under subsection (b), in  
 6 addition to being available for payments to States, shall also  
 7 be available for expenditure by the Surgeon General in other-  
 8 wise carrying out ~~such subsection~~ *the respective subsections*,  
 9 including expenditures for printing and binding of the findings  
 10 of investigations, and for pay and allowances and traveling  
 11 expenses of personnel of the Service engaged in activities  
 12 authorized by ~~such subsection~~ *the respective subsections*.

#### 13 HEALTH EDUCATION AND INFORMATION

14 SEC. 315. From time to time the Surgeon General shall  
 15 issue information related to public health, in the form of publi-  
 16 cations or otherwise, for the use of the public, and shall  
 17 publish weekly reports of health conditions in the United  
 18 States and other countries and other pertinent health informa-  
 19 tion for the use of persons and institutions engaged in work  
 20 related to the functions of the Service.

#### 21 PART C—HOSPITALS, MEDICAL EXAMINATIONS, AND

#### 22 MEDICAL CARE

#### 23 HOSPITALS

24 SEC. 321. The Surgeon General, pursuant to regulations,  
 25 shall—

1           (a) Control, manage, and operate all institutions,  
2       hospitals, and stations of the Service, and provide for  
3       the care, treatment and hospitalization of patients, includ-  
4       ing the furnishing of prosthetic and orthopedic devices;  
5       *and from time to time, with the approval of the President,*  
6       *select suitable sites for and establish such additional in-*  
7       *stitutions, hospitals, and stations in the States and posses-*  
8       *sions of the United States as in his judgment are neces-*  
9       *sary to enable the Service to discharge its functions and*  
10      *duties;*

11          (b) Provide for the transfer of Public Health Serv-  
12      ice patients, in the care of attendants where necessary,  
13      between hospitals and stations operated by the Service  
14      or between such hospitals and stations and other hos-  
15      pitals and stations in which Public Health Service  
16      patients may be received, and the payment of expenses  
17      of such transfer;

18          (c) Provide for the disposal of articles produced  
19      by patients in the course of their curative treatment,  
20      either by allowing the patient to retain such articles or  
21      by selling them and depositing the money received  
22      therefor to the credit of the appropriation from which  
23      the materials for making the articles were purchased;  
24      and

25          (d) Provide for the disposal of money and effects,

1 in the custody of the hospitals or stations, of deceased  
2 patients.

3 CARE AND TREATMENT OF SEAMEN AND CERTAIN OTHER  
4 PERSONS

5 SEC. 322. (a) The following persons shall be entitled,  
6 in accordance with regulations, to medical, surgical, and  
7 dental treatment and hospitalization without charge at hos-  
8 pitals and other stations of the Service:

9 (1) Seamen employed on vessels of the United  
10 States registered, enrolled, and licensed under the mari-  
11 time laws thereof, other than canal boats engaged in the  
12 coasting trade;

13 (2) Seamen employed on United States or foreign  
14 flag vessels as employees of the United States through  
15 the War Shipping Administration;

16 (3) Seamen, not enlisted or commissioned in the  
17 military or naval establishments, who are employed on  
18 State school ships or on vessels of the United States  
19 Government of more than five tons' burden;

20 (4) Cadets at State maritime academies or on State  
21 training ships;

22 (5) Seamen on vessels of the Mississippi River  
23 Commission and, upon application of their commanding  
24 officers, officers and crews of vessels of the Fish and  
25 Wildlife Service;



1           (6) Enrollees in the United States Maritime Service  
2       on active duty and members of the Merchant Marine  
3       Cadet Corps; and

4           (7) Employees and noncommissioned officers in the  
5       field service of the Public Health Service when injured  
6       or taken sick in line of duty.

7       (b) When suitable accommodations are available, sea-  
8       men on foreign-flag vessels may be given medical, surgical,  
9       and dental treatment and hospitalization on application of  
10      the master, owner, or agent of the vessel at hospitals and  
11      other stations of the Service at rates fixed by regulations.  
12      All expenses connected with such treatment, including burial  
13      in the event of death, shall be paid by such master, owner,  
14      or agent. No such vessel shall be granted clearance until  
15      such expenses are paid or their payment appropriately guar-  
16      anteed to the Collector of Customs.

17       (c) Any person when detained in accordance with quar-  
18      antine laws, or, at the request of the Immigration and Natu-  
19      ralization Service, any person detained by that Service, may  
20      be treated and cared for by the Public Health Service.

21       (d) Persons not entitled to treatment and care at insti-  
22      tutions, hospitals, and stations of the Service may, in accord-  
23      ance with regulations of the Surgeon General, be admitted  
24      thereto for temporary treatment and care in case of  
25      emergency.

1       (e) Persons entitled to care and treatment under subsec-  
2 tion (a) of this section may, in accordance with regulations,  
3 receive such care and treatment at the expense of the Service  
4 from public or private medical or hospital facilities other than  
5 those of the Service, when authorized by the officer in charge  
6 of the station at which the application is made.

7           CARE AND TREATMENT OF FEDERAL PRISONERS

8       SEC. 323. The Service shall supervise and furnish med-  
9 ical treatment and other necessary medical, psychiatric, and  
10 related technical and scientific services, authorized by the  
11 Act of May 13, 1930, as amended (U. S. C., 1940 edition,  
12 title 18, secs. 751, 752), in penal and correctional in-  
13 stitutions of the United States.

14          EXAMINATION AND TREATMENT OF FEDERAL EMPLOYEES

15       SEC. 324. The Surgeon General is authorized to provide  
16 at institutions, hospitals, and stations of the Service medical,  
17 surgical, and hospital services and supplies for persons en-  
18 titled to treatment under the United States Employees' Com-  
19 pension Act and extensions thereof. The Surgeon General  
20 may also provide for making medical examinations of—

21           (a) employees of the Alaska Railroad and employ-  
22 ees of the Federal Government for retirement purposes;

23           (b) employees in the Federal classified service, and  
24 applicants for appointment, as requested by the Civil

1 Service Commission for the purpose of promoting health  
2 and efficiency;

3 (c) seamen for purposes of qualifying for cer-  
4 tificates of service; and

5 (d) employees eligible for benefits under the  
6 Longshoremen's and Harbor Workers' Compensation  
7 Act, as amended (U. S. C., 1940 edition, title 33,  
8 chapter 18), as requested by any deputy commis-  
9 sioner thereunder.

10 EXAMINATION OF ALIENS

11 SEC. 325. The Surgeon General shall provide for making,  
12 at places within the United States or in other countries,  
13 such physical and mental examinations of aliens as are  
14 required by the immigration laws, subject to administra-  
15 tive regulations prescribed by the Attorney General and  
16 medical regulations prescribed by the Surgeon General with  
17 the approval of the Administrator.

18 SERVICES TO COAST GUARD, COAST AND GEODETIC SURVEY,

19 AND PUBLIC HEALTH SERVICE

20 SEC. 326. (a) Subject to regulations of the President—

21 (1) commissioned officers, chief warrant officers.  
22 warrant officers, cadets, and enlisted personnel of the  
23 Regular Coast Guard, including those on shore duty  
24 and those on detached duty, whether on active duty

1 or retired; and Regular and temporary members of  
2 the United States Coast Guard Reserve when on active  
3 duty or when retired for disability;

4 (2) commissioned officers, ships' officers, and  
5 members of the crews of vessels of the United States  
6 Coast and Geodetic Survey, including those on shore  
7 duty and those on detached duty, whether on active  
8 duty or retired; and

9 (3) commissioned officers of the Regular Corps  
10 of the Public Health Service, whether on active duty  
11 or retired, and commissioned officers of the Reserve  
12 Corps when on active duty or when retired for dis-  
13 ability;

14 shall be entitled to medical, surgical, and dental treatment  
15 and hospitalization by the Service. The Surgeon General  
16 may detail commissioned officers for duty aboard vessels of  
17 the Coast Guard or the Coast and Geodetic Survey.

18 (b) Subject to regulations of the President, the depend-  
19 ent members of families (as defined in such regulations) of  
20 persons specified in subsection (a), other than temporary  
21 members of the United States Coast Guard Reserve, shall  
22 be furnished medical advice and out-patient treatment by  
23 the Service at its hospitals and relief stations, and they shall  
24 also be furnished hospitalization at hospitals of the Service,



1 if suitable accommodations are available, at a per diem cost  
2 to the officer, enlisted person, or member of a crew concerned.  
3 ~~Such cost shall be at such uniform rate as may be prescribed~~  
4 ~~in such regulations of the President.~~ *Such cost shall be at*  
5 *such uniform rate as may be prescribed from time to time by*  
6 *the President for the hospitalization of dependents of naval*  
7 *and Marine Corps personnel at any naval hospital, pursuant*  
8 *to section 2 of the Act of May 10, 1943 (57 Stat. 80).*

9 (c) The Service shall provide all services referred to in  
10 subsection (a) required by the Coast Guard and shall per-  
11 form all duties prescribed by statute in connection with  
12 the examinations to determine physical or mental condition  
13 for purposes of appointment, enlistment, and reenlistment,  
14 promotion and retirement, and officers of the Service assigned  
15 to duty on Coast Guard vessels may extend aid to the crews  
16 of American vessels engaged in deep-sea fishing.

#### 17 INTERDEPARTMENTAL WORK

18 SEC. 327. Nothing contained in this part shall affect  
19 the authority of the Service to furnish any materials, sup-  
20 plies, or equipment, or perform any work or services,  
21 requested in accordance with section 7 of the Act of May 21,  
22 1920, as amended (U. S. C., 1940 edition, title 31, sec.  
23 686), or the authority of any other executive department  
24 to furnish any materials, supplies, or equipment, or perform

1 any work or services, requested by the Federal Security  
2 Agency for the Service in accordance with that section.

3 PART D—LEPERS

4 RECEIPT OF LEPERS

5 SEC. 331. The Service shall, in accordance with regu-  
6 lations, receive into any hospital of the Service suitable for  
7 his accommodation any person afflicted with leprosy who  
8 presents himself for care, detention, or treatment, or who may  
9 be apprehended under section 332 or 361 of this Act, and  
10 any person afflicted with leprosy duly consigned to the care  
11 of the Service by the proper health authority of any State,  
12 Territory, or the District of Columbia. The Surgeon General  
13 is authorized, upon the request of any health authority, to  
14 send for any person within the jurisdiction of such authority  
15 who is afflicted with leprosy and to convey such person to the  
16 appropriate hospital for detention and treatment. When the  
17 transportation of any such person is undertaken for the pro-  
18 tection of the public health the expense of such removal shall  
19 be met from funds available for the maintenance of hospitals  
20 of the Service.

21 APPREHENSION, DETENTION, TREATMENT, AND RELEASE

22 SEC. 332. The Surgeon General may provide by regu-  
23 lation for the apprehension, detention, treatment, and release  
24 of persons being treated by the Service for leprosy.

## PART E—NARCOTICS ADDICTS

## CARE AND TREATMENT

1           SEC. 341. The Surgeon General is authorized to provide  
2  
3 for the confinement, care, protection, treatment, and disci-  
4 pline of persons addicted to the use of habit-forming narcotic  
5 drugs who voluntarily submit themselves for treatment and  
6 addicts who have been or are hereafter convicted of offenses  
7 against the United States, including persons convicted by gen-  
8 eral courts martial and consular courts. Such care and treat-  
9 ment shall be provided at hospitals of the Service especially  
10 equipped for the accommodation of such patients and shall  
11 be designed to rehabilitate such persons, to restore them to  
12 health, and, where necessary, to train them to be self-sup-  
13 porting and self-reliant.

## EMPLOYMENT OF ADDICTS

15  
16       SEC. 342. Narcotic addicts in hospitals of the Service  
17 designated for their care shall be employed in such manner  
18 and under such conditions as the Surgeon General may direct.  
19 In such hospitals the Surgeon General may, in his discretion,  
20 establish industries, plants, factories, or shops for the produc-  
21 tion and manufacture of articles, commodities, and supplies  
22 for the United States Government. The Secretary of the  
23 Treasury may require any Government department, estab-  
24 lishment, or other institution, for whom appropriations are

1 made directly or indirectly by the Congress of the United  
2 States, to purchase at current market prices, as determined  
3 by him or his authorized representative, such of the articles,  
4 commodities, or supplies so produced or manufactured as  
5 meet their specifications; and the Surgeon General shall pro-  
6 vide for payment to the inmates or their dependents of such  
7 pecuniary earnings as he may deem proper. The Adminis-  
8 trator shall establish a working-capital fund for such in-  
9 dustries, plants, factories, and shops out of any funds appro-  
10 priated for Public Health Service hospitals at which addicts  
11 are treated and cared for; and such fund shall be available  
12 for the purchase, repair, or replacement of machinery or  
13 equipment, for the purchase of raw materials and supplies,  
14 for the purchase of uniforms and other distinctive wearing  
15 apparel of employees in the performance of their official  
16 duties, and for the employment of necessary civilian officers  
17 and employees. The Surgeon General may provide for the  
18 disposal of products of the industrial activities conducted  
19 pursuant to this section, and the proceeds of any sales thereof  
20 shall be covered into the Treasury of the United States to  
21 the credit of the working-capital fund.

22

## CONVICTS

23

SEC. 343. (a) The authority vested with the power to  
24 designate the place of confinement of a prisoner shall transfer  
25 to hospitals of the Service especially equipped for the ac-



1 commodation of addicts, if accommodations are available,  
2 all addicts who have been or are hereafter sentenced to con-  
3 finement, or who are now or shall hereafter be confined, in  
4 any penal, correctional, disciplinary, or reformatory institu-  
5 tion of the United States, including those addicts convicted  
6 of offenses against the United States who are confined in  
7 State and Territorial prisons, penitentiaries, and reformatories,  
8 except that no addict shall be transferred to a hospital of the  
9 Service who, in the opinion of the officer authorized to direct  
10 the transfer, is not a proper subject for confinement in such  
11 an institution either because of the nature of the crime he has  
12 committed or because of his apparent incorrigibility. The  
13 authority vested with the power to designate the place of  
14 confinement of a prisoner shall transfer from a hospital of the  
15 Service to the institution from which he was received, or to  
16 such other institution as may be designated by the proper  
17 authority, any addict whose presence at a hospital of the  
18 Service is detrimental to the well-being of the hospital or who  
19 does not continue to be a narcotic addict. All transfers of  
20 such prisoners to or from a hospital of the Service shall be  
21 accompanied by necessary attendants as directed by the  
22 officer in charge of such hospital and the actual and necessary  
23 expenses incident to such transfers shall be paid from the  
24 appropriation for the maintenance of such Service hospital  
25 except to the extent that other Federal agencies are author-

1 ized or required by law to pay expenses incident to such  
2 transfers. *When sentence is pronounced against any person*  
3 *whom the prosecuting officer believes to be an addict, such*  
4 *officer shall report to the authority vested with the power to*  
5 *designate the place of confinement, the name of such person,*  
6 *the reasons for his belief, all pertinent facts bearing on such*  
7 *addiction, and the nature of the offense committed.* When-  
8 ever an alien addict transferred to a Service hospital pursuant  
9 to this subsection is entitled to his discharge but is subject  
10 to deportation, in lieu of being returned to the penal institu-  
11 tion from which he came he shall be deported by the authority  
12 vested by law with power over deportation.

13 (b) The provisions of the Act of June 21, 1902, as  
14 amended (U. S. C., 1940 edition, title 18, secs. 710-712a),  
15 regulating commutation of sentence for good conduct of  
16 United States prisoners, section 8 of the Act of May 27, 1930  
17 (U. S. C., 1940 edition, title 18, sec. 744h), regulating  
18 commutation of sentence for employment in industry, and  
19 the Act of June 25, 1910, as amended (U. S. C., 1940  
20 edition, title 18, secs. 714-723c), relating to parole, shall be  
21 applicable to any narcotic addict confined in any institution  
22 in execution of a judgment or sentence upon conviction of  
23 an offense against the United States; except that no narcotic  
24 addict confined in any institution, whether or not an institu-  
25 tion of the Public Health Service, shall be released by reason

1 of commutation of sentence or parole until the Surgeon  
2 General shall have certified that such individual is no longer  
3 an addict.

4 (c) Not later than one month prior to the expiration  
5 of the sentence of any addict confined in a Service hospital,  
6 he shall be examined by the Surgeon General or his author-  
7 ized representative. If the Surgeon General believes the  
8 person to be discharged is still an addict and that he may by  
9 further treatment in a Service hospital be cured of his ad-  
10 diction, the addict shall be informed, in accordance with  
11 regulations, of the advisability of his submitting himself to  
12 further treatment. The addict may then apply in writing  
13 to the Surgeon General for further treatment in a Service  
14 hospital for a period not exceeding the maximum length of  
15 time considered necessary by the Surgeon General. Upon  
16 approval of the application by the Surgeon General or his  
17 authorized agent, the addict may be given such further  
18 treatment as is necessary to cure him of his addiction.

19 (d) Every person convicted of an offense against the  
20 United States, upon discharge, or upon release on parole,  
21 from a hospital of the Service, shall be furnished with the gra-  
22 tuities and transportation authorized by law to be furnished  
23 to prisoners upon release from a penal, correctional, disci-  
24 plinary, or reformatory institution.

25 (e) Any court of the United States having the power

1 to suspend the imposition or execution of sentence and to  
2 place a defendant on probation under any existing laws may  
3 impose as one of the conditions of such probation that the  
4 defendant, if an addict, shall submit himself for treatment  
5 at a hospital of the Service especially equipped for the  
6 accommodation of addicts until discharged therefrom as  
7 cured and that he shall be admitted thereto for such purpose.  
8 Upon the discharge of any such probationer from a hospital  
9 of the Service, he shall be furnished with the gratuities and  
10 transportation authorized by law to be furnished to prisoners  
11 upon release from a penal, correctional, disciplinary, or  
12 reformatory institution. The actual and necessary expense  
13 incident to transporting such probationer to such hospital  
14 and to furnishing such transportation and gratuities shall  
15 be paid from the appropriation for the maintenance of such  
16 hospital except to the extent that other Federal agencies  
17 are authorized or required by law to pay the cost of such  
18 transportation: *Provided*, That where existing law vests a  
19 discretion in any officer as to the place to which transporta-  
20 tion shall be furnished or as to the amount of clothing and  
21 gratuities to be furnished, such discretion shall be exercised  
22 by the Surgeon General with respect to addicts discharged  
23 from hospitals of the Service.

24

## VOLUNTARY PATIENTS

25

SEC. 344. (a) Any addict, whether or not he shall have



1 been convicted of an offense against the United States, may  
2 apply to the Surgeon General for admission to a hospital  
3 of the Service especially equipped for the accommodation  
4 of addicts.

5 (b) Any applicant shall be examined by the Surgeon  
6 General who shall determine whether the applicant is an  
7 addict, whether by treatment in a hospital of the Service he  
8 may probably be cured of his addiction, and the estimated  
9 length of time necessary to effect his cure. The Surgeon  
10 General may, in his discretion, admit the applicant to a Serv-  
11 ice hospital. No such addict shall be admitted unless he  
12 agrees to submit to treatment for the maximum amount of  
13 time estimated by the Surgeon General to be necessary to  
14 effect a cure, and unless suitable accommodations are avail-  
15 able after all eligible addicts convicted of offenses against  
16 the United States have been admitted. Any such addict  
17 may be required to pay for his subsistence, care, and treat-  
18 ment at rates fixed by the Surgeon General and amounts so  
19 paid shall be covered into the Treasury of the United States  
20 to the credit of the appropriation from which the expenditure  
21 for his subsistence, care, and treatment was made.

22 ~~(d)~~ (c) Any addict admitted for treatment under this  
23 section, including any addict, not convicted of an offense,  
24 who voluntarily submits himself for treatment, may be con-

1 fined in a hospital of the Service for a period not exceeding  
2 the maximum amount of time estimated by the Surgeon  
3 General as necessary to effect a cure of the addiction or until  
4 such time as he ceases to be an addict.

5 ~~(e)~~ (d) Any addict admitted for treatment under this  
6 section shall not thereby forfeit or abridge any of his rights as  
7 a citizen of the United States; nor shall such admission or  
8 treatment be used against him in any proceeding in any  
9 court; and the record of his voluntary commitment shall be  
10 confidential and shall not be divulged.

11 **PENALTIES**

12 SEC. 345. (a) Any person not authorized by law or by  
13 the Surgeon General who introduces or attempts to intro-  
14 duce into or upon the grounds of any hospital of the Service  
15 at which addicts are treated and cared for, any habit-  
16 forming narcotic drug, weapon, or any other contraband  
17 article or thing, or any contraband letter or message intended  
18 to be received by an inmate thereof, shall be guilty of a felony  
19 and, upon conviction thereof, shall be punished by imprison-  
20 ment for not more than ten years.

21 (b) It shall be unlawful for any person properly com-  
22 mitted thereto to escape or attempt to escape from a hos-  
23 pital of the Service at which addicts are treated and cared  
24 for, and any such person upon apprehension and conviction  
25 in a United States court shall be punished by imprisonment

1 for not more than five years, such sentence to begin upon  
2 the expiration of the sentence for which such person was  
3 originally confined.

4 (c) Any person who procures the escape of any person  
5 admitted to a hospital of the Service at which addicts are  
6 treated and cared for, or who advises, connives at, aids, or  
7 assists in such escape, or who conceals any such inmate  
8 after such escape, shall be punished upon conviction in a  
9 United States court by imprisonment in the penitentiary  
10 for not more than three years.

#### 11 PART F—BIOLOGICAL PRODUCTS

##### 12 REGULATION OF BIOLOGICAL PRODUCTS

13 SEC. 351. (a) No person shall sell, barter, or exchange,  
14 or offer for sale, barter, or exchange in the District of Colum-  
15 bia, or send, carry, or bring for sale, barter, or exchange  
16 from any State or possession into any other State or pos-  
17 session or into any foreign country, or from any foreign  
18 country into any State or possession, any virus, therapeutic  
19 serum, toxin, antitoxin, or analogous product, or arsphen-  
20 mine or its derivatives (or any other trivalent organic arsenic  
21 compound), applicable to the prevention, treatment, or cure  
22 of diseases or injuries of man, unless (1) such virus, serum,  
23 toxin, antitoxin, or other product has been propagated or  
24 manufactured and prepared at an establishment holding an  
25 unsuspended and unrevoked license, issued by the Adminis-

1   trator as hereinafter authorized, to propagate or manufacture,  
2   and prepare such virus, serum, toxin, antitoxin, or other  
3   product for sale in the District of Columbia, or for sending,  
4   bringing, or carrying from place to place aforesaid; and (2)  
5   each package of such virus, serum, toxin, antitoxin, or other  
6   product is plainly marked with the proper name of the article  
7   contained therein, the name, address, and license number of  
8   the manufacturer, and the date beyond which the contents  
9   cannot be expected beyond reasonable doubt to yield their  
10   specific results. The suspension or revocation of any license  
11   shall not prevent the sale, barter, or exchange of any virus,  
12   serum, toxin, antitoxin, or other product aforesaid which has  
13   been sold and delivered by the licensee prior to such sus-  
14   pension or revocation, unless the owner or custodian of such  
15   virus, serum, toxin, antitoxin, or other product aforesaid has  
16   been notified by the Administrator not to sell, barter, or  
17   exchange the same.

18       (b) No person shall falsely label or mark any package  
19   or container of any virus, serum, toxin, antitoxin, or other  
20   product aforesaid; nor alter any label or mark on any pack-  
21   age or container of any virus, serum, toxin, antitoxin, or other  
22   product aforesaid so as to falsify such label or mark.

23       (c) Any officer, agent, or employee of the Federal Secu-  
24   rity Agency, authorized by the Administrator for the purpose,  
25   may during all reasonable hours enter and inspect any estab-



1 lishment for the propagation or manufacture and preparation  
2 of any virus, serum, toxin, antitoxin, or other product afore-  
3 said for sale, barter, or exchange in the District of Columbia,  
4 or to be sent, carried, or brought from any State or possession  
5 into any other State or possession or into any foreign country,  
6 or from any foreign country into any State or possession.

7 (d) Licenses for the maintenance of establishments for  
8 the propagation or manufacture and preparation of products  
9 described in subsection (a) of this section may be issued only  
10 upon a showing that the establishment and the products for  
11 which a license is desired meet standards, designed to insure  
12 the continued safety, purity, *and* potency ~~and efficaciousness~~  
13 of such products, prescribed in regulations made jointly by the  
14 Surgeon General, the Surgeon General of the Army, and the  
15 Surgeon General of the Navy, and approved by the Adminis-  
16 trator, and licenses for new products may be issued only upon  
17 a showing that they meet such standards. All such licenses  
18 shall be issued, suspended, and revoked as prescribed by regu-  
19 lations and all licenses issued for the maintenance of estab-  
20 lishments for the propagation or manufacture and prepara-  
21 tion, in any foreign country, of any such products for sale,  
22 barter, or exchange in any State or possession shall be issued  
23 upon condition that the licensees will permit the inspection  
24 of their establishments in accordance with subsection (c)  
25 of this section.

1 (e) No person shall interfere with any officer, agent,  
 2 or employee of the Service in the performance of any duty  
 3 imposed upon him by this section or by regulations made  
 4 by authority thereof.

5 (f) Any person who shall violate, or aid or abet in  
 6 violating, any of the provisions of this section shall be pun-  
 7 ished upon conviction by a fine not exceeding \$500 or by  
 8 imprisonment not exceeding one year, or by both such fine  
 9 and imprisonment, in the discretion of the court.

10 (g) The persons and the products to which this section  
 11 is applicable shall be subject also to the provisions of the  
 12 *Nothing contained in this Act shall be construed as in any*  
 13 *way affecting, modifying, repealing, or superseding the pro-*  
 14 *visions of the Federal Food, Drug, and Cosmetic Act, except*  
 15 *that section 505 of such Act shall not apply in the case of*  
 16 *any virus, serum, toxin, antitoxin, or other product propa-*  
 17 *gated, manufactured, or prepared pursuant to an unsuspended*  
 18 *and unrevoked license issued under this section (U. S. C.,*  
 19 *1940 edition, title 21, ch. 9).*

#### 20 PREPARATION OF BIOLOGICAL PRODUCTS

21 SEC. 352. (a) The Service may prepare for its own use  
 22 any product described in section 351 and any product neces-  
 23 sary to carrying out any of the purposes of section 301.

24 (b) The Service may prepare any product described in  
 25 section 351 for the use of other Federal departments or

1 agencies, and public or private agencies and individuals  
2 engaged in work in the field of medicine when such product  
3 is not available from establishments licensed under such  
4 section.

5           PART G—QUARANTINE AND INSPECTION

6           CONTROL OF COMMUNICABLE DISEASES

7       SEC. 361. (a) The Surgeon General, with the approval  
8 of the Administrator, is authorized to make and enforce such  
9 regulations as in his judgment are necessary to prevent the  
10 introduction, transmission, or spread of communicable diseases  
11 from foreign countries into the States or possessions, or from  
12 one State or possession into any other State or possession.  
13 For purposes of carrying out and enforcing such regulations,  
14 the Surgeon General may provide for such inspection, fumi-  
15 gation, disinfection, sanitation, pest extermination, destruction  
16 of animals or articles found to be so infected or contaminated  
17 as to be sources of dangerous infection to human beings, and  
18 other measures, as in his judgment may be necessary.

19       (b) Regulations prescribed under this section shall not  
20 provide for the apprehension, detention, or conditional re-  
21 lease of individuals except for the purpose of preventing the  
22 introduction, transmission, or spread of such communicable  
23 diseases as may be specified from time to time in Executive  
24 orders of the President upon the recommendation of the Na-  
25 tional Advisory Health Council and the Surgeon General.



1       (c) Except as provided in subsection (d), regulations  
2 prescribed under this section, insofar as they provide for  
3 the apprehension, detention, examination, or conditional re-  
4 lease of individuals, shall be applicable only to individuals  
5 coming into a State or possession from a foreign country, the  
6 Territory of Hawaii, or a possession.

7       (d) On recommendation of the National Advisory  
8 Health Council, regulations prescribed under this section may  
9 provide for the apprehension and examination of any indi-  
10 vidual reasonably believed to be infected with a communi-  
11 cable disease in a communicable stage and (1) to be mov-  
12 ing or about to move from a State to another State; or (2)  
13 to be a probable source of infection to individuals who, while  
14 infected with such disease in a communicable stage, will be  
15 moving from a State to another State. Such regulations may  
16 provide that if upon examination any such individual is  
17 found to be infected, he may be detained for such time and  
18 in such manner as may be reasonably necessary.

19 SUSPENSION OF ENTRIES AND IMPORTS FROM DESIGNATED  
20 PLACES

21       SEC. 362. Whenever the Surgeon General determines  
22 that by reason of the existence of any communicable disease  
23 in a foreign country there is serious danger of the introduction  
24 of such disease into the United States, and that this danger  
25 is so increased by the introduction of persons or property from



1 such country that a suspension of the right to introduce such  
2 persons and property is required in the interest of the public  
3 health, the Surgeon General, in accordance with regulations  
4 approved by the President, shall have the power to prohibit,  
5 in whole or in part, the introduction of persons and property  
6 from such countries or places as he shall designate in order to  
7 avert such danger, and for such period of time as he may  
8 deem necessary for such purpose.

9 SPECIAL POWERS IN TIME OF WAR

10 SEC. 363. To protect the military and naval forces and  
11 war workers of the United States, in time of war, against  
12 any communicable disease specified in Executive orders as  
13 provided in subsection (b) of section 361, the Surgeon Gen-  
14 eral, on recommendation of the National Advisory Health  
15 Council, is authorized to provide by regulations for the appre-  
16 hension and examination, in time of war, of any individual  
17 reasonably believed (1) to be infected with such disease in a  
18 communicable stage and (2) to be a probable source of in-  
19 fection to members of the armed forces of the United States  
20 or to individuals engaged in the production or transportation  
21 of arms, munitions, ships, food, clothing, or other supplies  
22 for the armed forces. Such regulations may provide that if  
23 upon examination any such individual is found to be so in-  
24 fected, he may be detained for such time and in such manner  
25 as may be reasonably necessary.

## QUARANTINE STATIONS

SEC. 364. (a) Except as provided in title II of the Act of June 15, 1917, as amended (U. S. C., 1940 edition, title 50, secs. 191-194), the Surgeon General shall control, direct, and manage all United States quarantine stations, grounds, and anchorages, designate their boundaries, and designate the quarantine officers to be in charge thereof. With the approval of the President he shall from time to time select suitable sites for and establish such additional stations, grounds, and anchorages in the States and possessions of the United States as in his judgment are necessary to prevent the introduction of communicable diseases into the States and possessions of the United States.

(b) The Surgeon General shall establish the hours during which quarantine service shall be performed at each quarantine station, and, upon application by any interested party, may establish quarantine inspection during the twenty-four hours of the day, or any fraction thereof, at such quarantine stations as, in his opinion, require such extended service. He may restrict the performance of quarantine inspection to hours of daylight for such arriving vessels as cannot, in his opinion, be satisfactorily inspected during hours of darkness. No vessel shall be required to undergo quarantine inspection during the hours of darkness, unless the quarantine

1 officer at such quarantine station shall deem an immediate  
2 inspection necessary to protect the public health. Uniformity  
3 shall not be required in the hours during which quarantine  
4 inspection may be obtained at the various ports of the United  
5 States.

6 CERTAIN DUTIES OF CONSULAR AND OTHER OFFICERS

7 SEC. 365. (a) Any consular or medical officer of the  
8 United States, designated for such purpose by the Adminis-  
9 trator, shall make reports to the Surgeon General, on such  
10 forms and at such intervals as the Surgeon General may  
11 prescribe, of the health conditions at the port or place at  
12 which such officer is stationed.

13 (b) It shall be the duty of the customs officers and of  
14 Coast Guard officers to aid in the enforcement of quarantine  
15 rules and regulations; but no additional compensation, except  
16 actual and necessary traveling expenses, shall be allowed any  
17 such officer by reason of such services.

18 BILLS OF HEALTH

19 SEC. 366. (a) ~~Any~~ *Except as otherwise prescribed in*  
20 *regulations, any* vessel at any foreign port or place clearing  
21 or departing for any port or place in a State or possession  
22 shall be required to obtain from the consular officer of the  
23 United States or from the Public Health Service officer,  
24 or other medical officer of the United States designated by  
25 the Surgeon General, at the port or place of departure, a bill



1 of health in duplicate, in the form prescribed by the Surgeon  
2 General. The President, from time to time, shall specify  
3 the ports at which a medical officer shall be stationed for  
4 this purpose. Such bill of health shall set forth the sanitary  
5 history and condition of said vessel, and shall state that it  
6 has in all respects complied with the regulations prescribed  
7 pursuant to subsection (c). Before granting such duplicate  
8 bill of health, such consular or medical officer shall be satis-  
9 fied that the matters and things therein stated are true.  
10 The consular officer shall be entitled to demand and receive  
11 the fees for bills of health and such fees shall be established  
12 by regulation.

13 (b) Original bills of health shall be delivered to the  
14 collectors of customs at the port of entry. Duplicate copies  
15 of such bills of health shall be delivered at the time of  
16 inspection to quarantine officers at such port. The bills of  
17 health herein prescribed shall be considered as part of the  
18 ship's papers, and when duly certified to by the proper con-  
19 sular or other officer of the United States, over his official  
20 signature and seal, shall be accepted as evidence of the  
21 statements therein contained in any court of the United  
22 States.

23 (c) The Surgeon General shall from time to time pre-  
24 scribe regulations, applicable to vessels referred to in sub-



1 section (a) of this section, for the purpose of preventing the  
2 introduction into the States or possessions of the United  
3 States of any communicable disease by securing the best  
4 sanitary condition of such vessels, their cargoes, passengers,  
5 and crews. Such regulations shall be observed by such  
6 vessels prior to departure, during the course of the voyage,  
7 and also during inspection, disinfection, or other quarantine  
8 procedure upon arrival at any United States quarantine  
9 station.

10 (d) The provisions of subsections (a) and (b) of this  
11 section shall not apply to vessels plying between such foreign  
12 ports on or near the frontiers of the United States and ports  
13 of the United States as are designated by treaty ~~or may be~~  
14 ~~designated by regulation; nor, to the extent prescribed by~~  
15 ~~regulations, to such of the other vessels referred to in sub-~~  
16 ~~section (a) hereof as may be designated in such regulations.~~

17 (e) It shall be unlawful for any vessel to enter any port  
18 in any State or possession of the United States to discharge  
19 its cargo, or land its passengers, except upon a certificate  
20 of the quarantine officer that regulations prescribed under  
21 subsection (c) have in all respects been complied with by  
22 such officer, the vessel, and its master. The master of every  
23 such vessel shall deliver such certificate to the collector of  
24 customs at the port of entry, together with the original bill

1 of health and other papers of the vessel. *The certificate re-*  
 2 *quired by this subsection shall be procurable from the quaran-*  
 3 *tine officer, upon arrival of the vessel at the quarantine station*  
 4 *and satisfactory inspection thereof, at any time within which*  
 5 *quarantine services are performed at such station.*

#### 6 CIVIL AIR NAVIGATION AND CIVIL AIRCRAFT

7 SEC. 367. The Surgeon General is authorized to pro-  
 8 vide by regulations for the application to ~~civil~~ air navigation  
 9 and ~~civil~~ aircraft of any of the provisions of sections 364,  
 10 365, and 366 and regulations prescribed thereunder (includ-  
 11 ing penalties and forfeitures for violations of such sections and  
 12 regulations), to such extent and upon such conditions as  
 13 he deems necessary for the safeguarding of the public health.

#### 14 PENALTIES

15 SEC. 368. (a) Any person who violates any regula-  
 16 tion prescribed under section 361, 362, or 363, or any  
 17 provision of section 366 or any regulation prescribed there-  
 18 under, or who enters or departs from the limits of any quar-  
 19 antine station, ground, or anchorage in disregard of quaran-  
 20 tine rules and regulations or without permission of the  
 21 quarantine officer in charge, shall be punished by a fine of  
 22 not more than \$1,000 or by imprisonment for not more than  
 23 one year, or both.

24 (b) Any vessel which violates section ~~364~~ or section  
 25 366, or any regulations ~~thereunder~~, *thereunder* or under section

1 ~~367~~ 364, or which enters within or departs from the limits of  
2 any quarantine station, ground, or anchorage in disregard of  
3 the quarantine rules and regulations or without permission  
4 of the officer in charge, shall forfeit to the United States  
5 not more than \$5,000, the amount to be determined by  
6 the court, which shall be a lien on such vessel, to be recov-  
7 ered by proceedings in the proper district court of the United  
8 States. In all such proceedings the United States district  
9 attorney shall appear on behalf of the United States; and all  
10 such proceedings shall be conducted in accordance with the  
11 rules and laws governing cases of seizure of vessels for vio-  
12 lation of the revenue laws of the United States.

13 (c) With the approval of the Administrator, the Surgeon  
14 General may, upon application therefor, remit or mitigate any  
15 forfeiture provided for under subsection (b) of this section,  
16 and he shall have authority to ascertain the facts upon all  
17 such applications.

18 ADMINISTRATION OF OATHS

19 SEC. 369. Medical officers of the United States, when  
20 performing duties as quarantine officers at any port or place  
21 within the United States, are authorized to take declarations  
22 and administer oaths in matters pertaining to the administra-  
23 tion of the quarantine laws and regulations of the United  
24 States.



PART H—TRAINING

TRAINING OF NURSES

SEC. 371. *The Surgeon General is authorized to provide for training and instruction of persons in nursing and related subjects, in educational and other training institutions which have been approved by the Surgeon General as meeting standards prescribed by regulations of the President; payment for such training and instruction, and for tuition, fees and subsistence, to be made through certification from time to time by the Surgeon General, in accordance with regulations of the President, to the Secretary of the Treasury of the name of the approved institution and the amount to be paid; and the Secretary shall make payment in accordance with such certification prior to audit or settlement by the General Accounting Office.*

TITLE IV—NATIONAL CANCER INSTITUTE

TO BE A DIVISION IN NATIONAL INSTITUTE OF HEALTH

SEC. 401. The National Cancer Institute shall be a division in the National Institute of Health.

CANCER RESEARCH, AND SO FORTH

SEC. 402. In carrying out the purposes of section 301 with respect to cancer the Surgeon General, through the National Cancer Institute and in cooperation with the National Cancer Advisory Council, shall—

(a) conduct, assist, and foster researches, investi-



gations, experiments, and studies relating to the cause, prevention, and methods of diagnosis and treatment of cancer;

(b) promote the coordination of researches conducted by the Institute and similar researches conducted by other agencies, organizations, and individuals;

(c) provide training and instruction in technical matters relating to the diagnosis and treatment of cancer;

(d) provide fellowships in the Institute from funds appropriated or donated for such purpose;

(e) secure for the Institute consultation services and advice of cancer experts from the United States and abroad;

(f) cooperate with State health agencies in the prevention, control, and eradication of cancer;

(g) procure, use, and lend radium as provided in section 403.

#### ADMINISTRATION

SEC. 403. (a) In carrying out the provisions of section 402 all appropriate provisions of section 301 shall be applicable to the authority of the Surgeon General, and he is authorized—

(1) to purchase radium, from time to time, without regard to section 3709 of the Revised Statutes, to make

1       such radium available for the purposes of this title, both  
2       to the Service and by loan to other agencies and institu-  
3       tions for such consideration and subject to such condi-  
4       tions as he may prescribe;

5               (2) to provide the necessary facilities where train-  
6       ing and instruction may be given in all technical matters  
7       relating to diagnosis and treatment of cancer to persons  
8       found by the Surgeon General to have proper technical  
9       qualifications, and designated by him for such training  
10      or instruction, and to fix and pay them a per diem allow-  
11      ance during such training or instruction of not to exceed  
12      \$10.

13       (b) The Surgeon General shall recommend acceptance  
14      of conditional gifts pursuant to section 501 of this Act, for  
15      study, investigation, or research into the cause, prevention,  
16      and methods of diagnosis and treatment of cancer, or for the  
17      acquisition of grounds or for the erection, equipment, or main-  
18      tenance of premises, buildings, or equipment of the Institute,  
19      only after consultation with the National Cancer Advisory  
20      Council. Donations of \$50,000 or over in aid of research  
21      under this title may be acknowledged by the establishment  
22      within the Institute of suitable memorials to the donors.

23       (c) In carrying out the purposes of section 402 grants-  
24      in-aid for cancer projects shall be made only after review and

1 recommendation of the National Cancer Advisory Council  
2 made pursuant to section 404.

3 FUNCTIONS OF COUNCIL

4 SEC. 404. The council is authorized—

5 (a) to review research projects or programs sub-  
6 mitted to or initiated by it relating to the study of the  
7 cause, prevention, or methods of diagnosis and treatment  
8 of cancer, and certify approval to the Surgeon General,  
9 for prosecution under section 402, of any such projects  
10 which it believes show promise of making valuable con-  
11 tributions to human knowledge with respect to the cause,  
12 prevention, or methods of diagnosis and treatment of  
13 cancer;

14 (b) to collect information as to studies which are  
15 being carried on in the United States or any other  
16 country as to the cause, prevention, and methods of  
17 diagnosis and treatment of cancer, by correspondence  
18 or by personal investigation of such studies, and with the  
19 approval of the Surgeon General make available such  
20 information through the appropriate publications for the  
21 benefit of health agencies and organizations (public or  
22 private), physicians, or any other scientists, and for  
23 the information of the general public;

24 (c) to review applications from any university,

1 hospital, laboratory, or other institution whether public  
2 or private, or from individuals, for grants-in-aid for  
3 research projects relating to cancer, and certify to the  
4 Surgeon General its approval of grants-in-aid in the  
5 cases of such projects which show promise of making  
6 valuable contributions to human knowledge with respect  
7 to the cause, prevention, or methods of diagnosis or  
8 treatment of cancer;

9 (d) to recommend to the Surgeon General for  
10 acceptance conditional gifts pursuant to section 501 of  
11 this Act; and

12 (e) to make recommendations to the Surgeon Gen-  
13 eral with respect to carrying out the provisions of this  
14 title.

#### 15 APPROPRIATIONS

16 SEC. 405. Appropriations to carry out the purposes of  
17 this title shall be available for the acquisition of land or the  
18 erection of buildings only if so specified, but in the absence  
19 of express limitation therein may be expended in the Dis-  
20 trict of Columbia for personal services, stenographic recording  
21 and translating services, by contract if deemed necessary,  
22 without regard to section 3709 of the Revised Statutes;  
23 traveling expenses (including the expenses of attendance at  
24 meetings when specifically authorized by the Surgeon Gen-  
25 eral) ; rental, supplies and equipment, purchase and exchange



1 of medical books, books of reference, directories, periodicals,  
2 newspapers, and press clippings; purchase, operation, and  
3 maintenance of motor-propelled passenger-carrying vehicles;  
4 printing and binding (in addition to that otherwise provided  
5 by law) ; and for all other necessary expenses in carrying out  
6 the provisions of this title.

7 OTHER WORK WITH RESPECT TO CANCER

8 SEC. 406. This title shall not be construed as limiting  
9 ~~(1)~~ (a) the functions or authority of the Surgeon General  
10 or the Public Health Service under any other title of this Act,  
11 or of any other officer or agency of the United States, relating  
12 to the study of the prevention, diagnosis, and treatment of  
13 cancer; or ~~(2)~~ (b) the expenditure of money therefor.

14 TITLE V—MISCELLANEOUS

15 GIFTS

16 SEC. 501. (a) The Administrator is authorized to ac-  
17 cept on behalf of the United States gifts made uncondi-  
18 tionally by will or otherwise for the benefit of the  
19 Service or for the carrying out of any of its functions. Con-  
20 ditional gifts may be so accepted if recommended by the  
21 Surgeon General, and the principal of and income from any  
22 such conditional gift shall be held, invested, reinvested, and  
23 used in accordance with its conditions, but no gift shall be  
24 accepted which is conditioned upon any expenditure not to be

1 met therefrom or from the income thereof unless such expen-  
2 diture has been approved by Act of Congress.

3 (b) Any unconditional gift of money accepted pursuant  
4 to the authority granted in subsection (a) of this section, the  
5 net proceeds from the liquidation (pursuant to subsection (c)  
6 or subsection (d) of this section) of any other property so  
7 accepted, and the proceeds of insurance on any such gift prop-  
8 erty not used for its restoration, shall be deposited in the  
9 Treasury of the United States and are hereby appropriated  
10 and shall be held in trust by the Secretary of the Treasury for  
11 the benefit of the Service, and he may invest and reinvest  
12 such funds in interest-bearing obligations of the United States  
13 or in obligations guaranteed as to both principal and interest  
14 by the United States. Such gifts and the income from such  
15 investments shall be available for expenditure in the operation  
16 of the Service and the performance of its functions, subject  
17 to the same examination and audit as is provided for appro-  
18 priations made for the Service by Congress.

19 (c) The evidences of any unconditional gift of in-  
20 tangible personal property, other than money, accepted  
21 pursuant to the authority granted in subsection (a) of this  
22 section shall be deposited with the Secretary of the Treasury  
23 and he, in his discretion, may hold them, or liquidate them  
24 except that they shall be liquidated upon the request of the  
25 Administrator, whenever necessary to meet payments re-

1 quired in the operation of the Service or the performance of  
2 its functions. The proceeds and income from any such  
3 property held by the Secretary of the Treasury shall be  
4 available for expenditure as is provided in subsection (b)  
5 of this section.

6 (d) The Administrator shall hold any real property or  
7 any tangible personal property accepted unconditionally pur-  
8 suant to the authority granted in subsection (a) of this sec-  
9 tion and he shall permit such property to be used for the  
10 operation of the Service and the performance of its functions  
11 or he may lease or hire such property, and may insure such  
12 property, and deposit the income thereof with the Secretary  
13 of the Treasury to be available for expenditure as provided in  
14 subsection (b) of this section: *Provided*, That the income  
15 from any such real property or tangible personal property  
16 shall be available for expenditure in the discretion of the  
17 Administrator for the maintenance, preservation, or repair  
18 and insurance of such property and that any proceeds from  
19 insurance may be used to restore the property insured. Any  
20 such property when not required for the operation of the  
21 Service or the performance of its functions may be liquidated  
22 by the Administrator, and the proceeds thereof deposited  
23 with the Secretary of the Treasury, whenever in his judgment  
24 the purposes of the gifts will be served thereby.

25 (e) *Donations of \$50,000 or over in aid of research*

1 *may be acknowledged by the establishment within the Na-*  
2 *tional Institute of Health of suitable memorials to the donors.*

3           USE OF IMMIGRATION STATION HOSPITALS

4       SEC. 502. The Immigration and Naturalization Service  
5 may, by agreement of the heads of the departments con-  
6 cerned, permit the Public Health Service to use hospitals at  
7 immigration stations for the care of Public Health Service  
8 patients. The Surgeon General shall reimburse the Immi-  
9 gration and Naturalization Service for the actual cost of  
10 furnishing fuel, light, water, telephone, and similar supplies  
11 and services, which reimbursement shall be covered into  
12 the proper Immigration and Naturalization Service appro-  
13 priation, or such costs may be paid from working funds  
14 established as provided by law, but no charge shall be  
15 made for the expense of physical upkeep of the hospitals.  
16 The Immigration and Naturalization Service shall reim-  
17 burse the Surgeon General for the care and treatment of  
18 persons detained in hospitals of the Public Health Service  
19 at the request of the Immigration and Naturalization Service  
20 unless such persons are entitled to care and treatment under  
21 section 322 (a).

22           MONEY COLLECTED FOR CARE OF PATIENTS

23       SEC. 503. Money collected as provided by law for ex-  
24 penses incurred in the care and treatment of foreign seamen,  
25 and money received for the care and treatment of pay pa-



1 tients, including any amounts received from any executive  
2 department on account of care and treatment of pay patients,  
3 shall be covered into the appropriation from which the  
4 expenses of such care and treatment were paid.

5 CARE OF PUBLIC HEALTH SERVICE PATIENTS AT SAINT  
6 ELIZABETHS HOSPITAL

7 SEC. 504. Insane patients entitled to treatment by the  
8 Service shall be admitted, upon order of the Administrator,  
9 into Saint Elizabeths Hospital or, upon order of the Surgeon  
10 General, into any hospital, institution, or station of the Serv-  
11 ice especially equipped for the accommodation of such pa-  
12 tients and shall be cared for and treated therein until cured  
13 or until ordered removed by the officer authorizing such  
14 admittance.

15 SETTLEMENT OF CLAIMS

16 SEC. 505. The Administrator may consider, ascertain,  
17 adjust, and determine any claim which shall accrue, on ac-  
18 count of damages occasioned by collisions or incident to the  
19 operation of vessels of the Service, and for which damages  
20 such vessels are found by him to be responsible. To be con-  
21 sidered for settlement under this section, claims must be  
22 presented to the Administrator within one year of their  
23 accrual. The amount ascertained and determined to be due  
24 any claimant, not exceeding \$3,000 in any one case, shall be  
25 certified to Congress as a legal claim for payment out of

1 appropriations that may be made therefor by Congress, to-  
2 gether with a brief statement of the character of each claim,  
3 the amount claimed, and the amount allowed. Acceptance  
4 by any claimant of the amount determined to be due under  
5 this section shall be deemed to be in full and final settlement  
6 of such claim against the Government of the United States.

7 - TRANSPORTATION OF REMAINS OF OFFICERS

8 SEC. 506. Appropriations available for traveling ex-  
9 penses of the Service shall be available for meeting the cost of  
10 preparation for burial and of transportation to the place of  
11 burial of remains of commissioned officers, and of personnel  
12 specified in regulations, who die in line of duty.

13 SETTLEMENT OF ACCOUNTS OF DECEASED OFFICERS

14 SEC. 507. (a) In the settlement of the accounts of de-  
15 ceased commissioned officers where the amount due the de-  
16 cedent's estate is less than \$1,000 and no demand is presented  
17 by a duly appointed representative of the estate, the account-  
18 ing officers may allow the amount found due to the decedent's  
19 widow or legal heirs in the following order of precedence:  
20 First, to the widow; second, if the decedent left no widow,  
21 or the widow be dead at time of settlement, then to the chil-  
22 dren or their issue, per stirpes; third, if no widow or children  
23 or their issue, then to the father and mother in equal parts,  
24 provided the father has not abandoned the support of his  
25 family, in which case to the mother alone; fourth, if either

1 the father or mother be dead, then to the one surviving;  
2 fifth, if there be no widow, child, father, or mother at the  
3 date of settlement, then to the brothers and sisters and chil-  
4 dren of deceased brothers and sisters, per stirpes.

5 (b) Subsection (a) shall not be construed so as to pre-  
6 vent payment of funeral expenses from the amount due the de-  
7 cedent's estate if a claim therefor is presented, before settle-  
8 ment by the accounting officers, by the person or persons who  
9 actually paid such expenses.

#### 10 TRANSFER OF FUNDS

11 SEC. 508. For the purpose of any reorganization under  
12 section 202, the Administrator, with the approval of the  
13 Director of the Bureau of the Budget, is authorized to  
14 make such transfers of funds between appropriations as may  
15 be necessary for the continuance of transferred functions.

#### 16 AVAILABILITY OF APPROPRIATIONS

17 SEC. 509. Appropriations for carrying out the pro-  
18 visions of section 301 shall be available for expenditure for  
19 personal services and rent at the seat of Government, for  
20 books of reference, periodicals, and exhibits, and for print-  
21 ing and binding.

#### 22 UNAUTHORIZED WEARING OF UNIFORMS

23 SEC. 510. Except as may be authorized by regulations  
24 of the President, the insignia and uniform of commissioned  
25 officers of the Service, or any distinctive part of such insignia

1 or uniform, or any insignia or uniform any part of which is  
2 similar to a distinctive part thereof, shall not be worn, after  
3 the promulgation of such regulations, by any person other  
4 than a commissioned officer of the Service, and any person  
5 violating this section shall be subject to the penalties provided  
6 by the Act of June 3, 1916, as amended (U. S. C., 1940  
7 edition, title 10, sec. 1393), in the case of unlawful wearing  
8 of the uniform of commissioned officers of the Army.

9

## ANNUAL REPORT

10 SEC. 511. The Surgeon General shall transmit to the  
11 Administrator, for submission to the Congress at the be-  
12 ginning of each regular session, a full report of the admin-  
13 istration of the functions of the Service under this Act,  
14 including a detailed statement of receipts and disbursements.

15 TITLE VI—TEMPORARY AND EMERGENCY PRO-  
16 VISIONS AND AMENDMENTS AND REPEALS

17 EXISTING POSITIONS, PROCEDURES, AND SO FORTH

18 SEC. 601. (a) The provisions of this Act shall not  
19 affect the term or tenure of office or employment of the  
20 Surgeon General, or of any officer or employee of the  
21 Service, or of any member of the National Advisory Health  
22 Council or the National Advisory Cancer Council, in office  
23 or employed at the time of its enactment.

24 (b) Notwithstanding the provisions of this Act, exist-  
25 ing positions, divisions, committees, and procedures in the



1 Service shall continue unless and until abolished, changed,  
2 or transferred pursuant to authority granted in this Act.

3 EXISTING REGULATIONS, AND SO FORTH

4 SEC. 602. Notwithstanding the provisions of this Act,  
5 existing rules, regulations of or applicable to the Service, and  
6 Executive orders, shall remain in effect until repealed, or  
7 until modified or superseded by regulations made in accord-  
8 ance with the provisions of this Act.

9 FUNDS, APPROPRIATIONS, AND PROPERTY

10 SEC. 603. All appropriations, allocations, and other  
11 funds, and all properties available for use by the Public  
12 Health Service or any division or unit thereof shall con-  
13 tinue to be available to the Service.

14 APPROPRIATIONS FOR EMERGENCY HEALTH AND

15 SANITATION ACTIVITIES

16 SEC. 604. For each fiscal year during the continuance of  
17 the present war and during any period of demobilization after  
18 the war, there is hereby authorized to be appropriated such  
19 sum as may be necessary to enable the Surgeon General,  
20 either directly or through State health authorities, to conduct  
21 health and sanitation activities in areas adjoining military  
22 or naval reservations within or without the United States,  
23 in areas where there are concentrations of military or naval  
24 forces, in Government and private industrial plants engaged  
25 in defense work, and in areas adjoining such industrial plants.

## EMPLOYEES' COMPENSATION

1  
2 SEC. 605. (a) Section 7 of the Act of September 7,  
3 1916, entitled "An Act to provide compensation for employ-  
4 ees of the United States suffering injuries while in the per-  
5 formance of their duties, and for other purposes", as amended  
6 (U. S. C., 1940 edition, title 5, sec. 757), is amended by  
7 changing the period at the end thereof to a colon and adding  
8 the following: "*Provided*, That whenever any person is en-  
9 titled to receive any benefits under this Act by reason of his  
10 injury, or by reason of the death of an employee, as defined  
11 in section 40, and is also entitled to receive from the United  
12 States any payments or benefits (other than the proceeds of  
13 any insurance policy), by reason of such injury or death under  
14 any other Act of Congress, because of service by him (or in  
15 the case of death, by the deceased) as an employee, as so  
16 defined, such person shall elect which benefits he shall re-  
17 ceive. Such election shall be made within one year after the  
18 injury or death, or such further time as the Commission may  
19 for good cause allow, and when made shall be irrevocable  
20 unless otherwise provided by law."

21 (b) The definition of the term "employee" in section  
22 40 of such Act of September 7, 1916, as amended (U. S. C.,  
23 1940 edition, title 5, sec. 790), is amended to read as  
24 follows:

1       “The term ‘employee’ includes all civil employees of the  
2 United States and of the Panama Railroad Company, com-  
3 missioned officers of the Regular Corps of the Public Health  
4 Service, officers in the Reserve of the Public Health Service  
5 on active duty, and all persons, other than independent con-  
6 tractors and their employees, employed on the Menominee  
7 Indian Reservation in the State of Wisconsin, subsequent to  
8 September 7, 1916, in operations conducted pursuant to the  
9 Act entitled ‘An Act to authorize the cutting of timber, the  
10 manufacture and sale of lumber, and the preservation of the  
11 forests on the Menominee Indian Reservation in the State of  
12 Wisconsin,’ approved March 28, 1908, as amended, or any  
13 other Act relating to tribal timber and logging operations on  
14 the Menominee Reservation.”

15       (c) In the case of injury or death of a commissioned  
16 officer of the Service occurring after November 10, 1943,  
17 and on or before the date of the termination of the present  
18 war, the election required by section 7 of such Act of Sep-  
19 tember 7, 1916, as amended (U. S. C., 1940 edition, title  
20 5, sec. 757), may be made, and the notice required by  
21 section 15 thereof and the written claim required by section  
22 18 thereof may be filed, within such time as may be  
23 provided by regulations of the United States Employees’  
24 Compensation Commission, but not later than the expiration

1 of one year following the termination of the present war.  
2 Prior to the expiration of such year any such election may  
3 be revised, and such revision shall operate retroactively  
4 to the date of death or injury, but there shall be deducted  
5 from the compensation or other benefit payable pursuant  
6 to a revised election any sum (except the proceeds of any  
7 insurance policy) theretofore paid on account of such  
8 death or injury.

9 (d) In the case of death of a commissioned officer  
10 of the Service which occurred after December 7, 1941,  
11 and prior to November 11, 1943, the rights provided to  
12 surviving beneficiaries by section 10 of the Public Health  
13 Service Act of 1943 shall continue notwithstanding the  
14 repeal of that Act. Such beneficiaries, in addition to the  
15 right to receive six months' pay, shall have the same right  
16 of election and of revising elections as is provided by sub-  
17 section (c) of this section, except that in case of a revised  
18 election no deduction shall be made on account of such six  
19 months' pay.

20 COMPUTATION OF RETIRED PAY IN CERTAIN CASES

21 SEC. 606. In the case of commissioned officers of the  
22 Service appointed prior to the enactment of this Act, there  
23 shall be included, in determining retired pay pursuant to  
24 section 211 (c) (1), noncommissioned service in the Public  
25 Health Service, as well as all commissioned service.



1 ALLOWANCES FOR UNIFORMS TO CERTAIN COMMISSIONED  
2 PERSONNEL

3 SEC. 607. Each commissioned officer of the Service who  
4 was appointed to the Regular Corps or called to active duty  
5 in the Reserve Corps since December 7, 1941, and prior to  
6 the enactment of this Act, and who on or after November  
7 11, 1943, was on active duty in the grade of junior assistant,  
8 assistant, or passed assistant and was receiving the pay of the  
9 first, second, or third pay period, shall be entitled to receive  
10 an allowance of \$250 for uniforms and equipment.

11 PATIENTS OF SAINT ELIZABETHS HOSPITAL IN PUBLIC  
12 HEALTH SERVICE HOSPITALS

13 SEC. 608. Insane patients entitled to treatment in Saint  
14 Elizabeths Hospital who may heretofore or hereafter, during  
15 the continuance of the present war, or during the period of  
16 six months thereafter, have been admitted to hospitals of the  
17 Service, may continue to be cared for and treated in such  
18 hospitals notwithstanding the termination of such period.

19 ELIGIBILITY OF OSTEOPATHS TO APPOINTMENT IN THE  
20 RESERVE CORPS

21 SEC. 609. For the duration of the present war and for  
22 six months thereafter graduates of reputable osteopathic col-  
23 leges shall be eligible for appointment as reserve officers in  
24 the Service.

## 1        TEMPORARY PROVISIONS RESPECTING MEDICAL AND

## 2                                HOSPITAL BENEFITS

3        SEC. 610. (a) Subject to regulations of the President,  
4 members of the Women's Reserve of the Coast Guard, or  
5 their dependents, shall be entitled to the benefits provided  
6 by section 326 for male officers and enlisted men of the  
7 Coast Guard or their dependents: *Provided*, That the hus-  
8 bands of such members shall not be considered dependents,  
9 and the children of such members shall not be considered  
10 dependents unless their father is dead or they are in fact  
11 dependent on their mother for their chief support.

12        ~~(b) Subject to regulations of the President, lightkeepers~~  
13 ~~and assistant lightkeepers (who during their active service~~  
14 ~~were entitled to medical relief at hospitals and other sta-~~  
15 ~~tions of the Public Health Service), and officers and crews~~  
16 ~~of vessels of the former Lighthouse Service, who have been~~  
17 ~~or who may hereafter be retired under the provisions of~~  
18 ~~section 6 of the Act of June 20, 1918, as amended (U. S. C.,~~  
19 ~~1940 edition, title 33, sec. 763), shall be entitled to medical,~~  
20 ~~surgical, and dental treatment and hospitalization by the~~  
21 ~~Public Health Service.~~

22        (b) *Subject to regulations of the President, lightkeepers,*  
23 *assistant lightkeepers, and officers and crews of vessels of*  
24 *the former Lighthouse Service, including any such persons*  
25 *who subsequent to June 30, 1939, have involuntarily been*

1 assigned to other civilian duty in the Coast Guard, who were  
 2 entitled to medical relief at hospitals and other stations of the  
 3 Public Health Service prior to enactment of this Act, and  
 4 who are now or hereafter on active duty or who have been  
 5 or may hereafter be retired under the provisions of section  
 6 6 of the Act of June 20, 1918, as amended (U. S. C., 1940  
 7 edition, title 33, sec. 763), shall be entitled to medical, sur-  
 8 gical, and dental treatment and hospitalization at hospitals  
 9 and other stations of the Public Health Service: Provided,  
 10 That such persons while on active duty shall also be entitled  
 11 to care and treatment in accordance with the provisions of  
 12 section 322 (e) of this Act.

13 (c) For the duration of the present war and for six  
 14 months thereafter, seamen employed on foreign-flag vessels  
 15 which are owned or operated by citizens of the United States  
 16 or by corporations incorporated under the law of the United  
 17 States or of any State shall be entitled to the same benefits as  
 18 are provided by section 322 (a) (1) for seamen employed  
 19 on vessels of the United States.

20 REPEAL OF EXISTING LAW

21 SEC. 611. The following statutes or parts of statutes  
 22 are hereby repealed:

23 The two paragraphs under the subheading "Marine—  
 24 hospital establishment (customs:)" under the heading "Under

1 *the Treasury Department” in section 3689 in title XLI of*  
 2 *the Revised Statutes of the United States;*

3       Section ~~3689~~ in title ~~XLI~~, and sections *Sections* 4801,  
 4 4802, 4803, 4804, 4805, and 4806 in title LIX of the  
 5 Revised Statutes of the United States;

6       The last paragraph under the heading “Miscellaneous”  
 7 in chapter 130, 18 Statutes at Large 371, which paragraph  
 8 is the seventh beginning on page 377;

9       Chapter 156, 18 Statutes at Large 485;

10       Chapter 66, 20 Statutes at Large 37;

11       Chapter 202, 20 Statutes at Large 484;

12       Chapter 61, 21 Statutes at Large 46;

13       Section 1, and the final clause of section 2 (which reads  
 14 as follows: “and the said quarantine stations when so estab-  
 15 lished shall be conducted by the Marine Hospital Service  
 16 under regulations framed in accordance with the Act of  
 17 April twenty-ninth, eighteen hundred and seventy-eight”),  
 18 of chapter 727, 25 Statutes at Large 355;

19       Chapter 19, 25 Statutes at Large 639;

20       Chapter 51, 26 Statutes at Large 31;

21       The last sentence of the paragraph headed “Office of the  
 22 Supervising Surgeon General, Marine Hospital Service” in  
 23 chapter 541, 26 Statutes at Large 908, which appears at  
 24 page 923 and reads as follows: “And hereafter, the Super-  
 25 vising Surgeon General is hereby authorized to cause the



1 detail of two surgeons and two passed assistant surgeons for  
2 duty in the Bureau, who shall each receive the pay and  
3 allowances of their respective grades in the general service.”;

4 Chapter 114, 27 Statutes at Large 449;

5 The last sentence of the paragraph headed “Office of  
6 Supervising Surgeon General, Marine Hospital Service”, in  
7 chapter 174, 28 Statutes at Large 162, which appears at  
8 page 179 and which reads as follows: “And hereafter the  
9 Supervising Surgeon General of the Marine Hospital Service  
10 is hereby authorized to cause the detail of an additional medi-  
11 cal officer and one hospital steward for duty in the Bureau,  
12 who shall each receive the pay and allowances of his respec-  
13 tive grade in the general service.”;

14 Chapter 213, 28 Statutes at Large 229;

15 Chapter 300, 28 Statutes at Large 372;

16 The last sentence of the paragraph headed “Office of  
17 Supervising Surgeon General, Marine Hospital Service”, in  
18 chapter 177, 28 Statutes at Large 764, which appears at  
19 page 780 and which reads as follows: “And hereafter the  
20 Supervising Surgeon General of the Marine Hospital Service  
21 is hereby authorized to cause the detail of two hospital at-  
22 tendants from the port of New York for duty in the labora-  
23 tory of the Bureau, and who shall each receive the pay  
24 equivalent to the compensation of a first-class hospital  
25 attendant.”;

1       The proviso at the end of the paragraph headed "Office  
2 of Supervising Surgeon-General Marine-Hospital Service" in  
3 chapter 265, 29 Statutes at Large 538, which appears at  
4 page 554 and which reads as follows: "*Provided*, That the  
5 Secretary of the Treasury is hereby authorized, in his discre-  
6 tion, to grant to the medical officers of the Marine-Hospital  
7 Service commissioned by the President, without deduction  
8 of pay, leaves of absence for the same period of time and in  
9 the same manner as is now authorized to be granted to  
10 officers of the Army by the Secretary of War";

11       Chapter 249, 30 Statutes at Large 976:

12       Section 10, chapter 191, 31 Statutes at Large 77, at  
13 page 80;

14       The first paragraph of section 97 of chapter 339, 31  
15 Statutes at Large 141;

16       Chapter 836, 31 Statutes at Large 1086;

17       That portion of the third paragraph of section 84 of  
18 chapter 1369, 32 Statutes at Large 691, which appears at  
19 page 711 and which reads as follows: "and the provisions  
20 of law relating to the public health and quarantine shall  
21 apply in the case of all vessels entering a port of the United  
22 States or its aforesaid possessions from said islands, where  
23 the customs officers at the port of departure shall perform  
24 the duties required by such law of consular officers in  
25 foreign ports";

1 Chapter 1370, 32 Statutes at Large 712;

2 Chapter 1378, 32 Statutes at Large 728;

3 Chapter 1443, 33 Statutes at Large 1009;

4 The last sentence of the last paragraph under the heading  
5 "Public Health and Marine Hospital Service" in chapter  
6 1484, 33 Statutes at Large 1214, which appears at page  
7 1217 and which reads as follows: "And the Secretary of the  
8 Treasury shall, for the fiscal year nineteen hundred and seven,  
9 and annually thereafter, submit to Congress, in the regular  
10 Book of Estimates, detailed estimates of the expenses of  
11 maintaining the Public Health and Marine Hospital  
12 Service,";

13 Public Resolution Numbered 21, 33 Statutes at Large  
14 1283;

15 Chapter 3433, 34 Statutes at Large 299;

16 Section 17 of chapter 1134, 34 Statutes at Large 898,  
17 at page 903;

18 That portion of the third paragraph under the heading  
19 "Back Pay and Bounty" in chapter 200, 35 Statutes at Large  
20 373, as amended by chapter 213, 52 Statutes at Large 352,  
21 which is at page 352 of 52 Statutes at Large and which reads  
22 as follows: "and of deceased commissioned officers of the  
23 Public Health Service";

24 The proviso in the tenth paragraph under the heading  
25 "Public Health and Marine Hospital Service" in chapter

1 285, 36 Statutes at Large 1363, which appears in the eighth  
2 paragraph on page 1394 and which reads as follows: "*Pro-*  
3 *vided*, That there may be admitted into said hospitals, for  
4 study, persons with infectious or other diseases affecting  
5 the public health, and not to exceed ten cases in any one  
6 hospital at one time", and the substantially similar pro-  
7 visions appearing under the heading "Public Health and  
8 Marine Hospital Service" or the heading "Public Health  
9 Service" in the following statutes: Chapter 355, 37 Statutes  
10 at Large 417, at page 435; chapter 3, 38 Statutes at  
11 Large 4, at page 24; chapter 209, 39 Statutes at Large  
12 262, at page 278; chapter 28, 40 Statutes at Large 459,  
13 at page 468; chapter 113, 40 Statutes at Large 634, at  
14 page 644; chapter 24, 41 Statutes at Large 163, at page  
15 175;

16 Chapter 288, 37 Statutes at Large 309;

17 The proviso at the end of the last paragraph under the  
18 heading "Public Health Service" in chapter 149, 37 Statutes  
19 at Large 912, which appears at page 915 and which reads  
20 as follows: "*Provided*, That hereafter the director of the  
21 Hygienic Laboratory shall receive the pay and allowances  
22 of a senior surgeon";

23 That portion of the second paragraph under the heading  
24 "Public Health Service" in chapter 3, 38 Statutes at Large  
25 4, which appears at page 23 and which reads as follows:



1 “at least six of the assistant surgeons provided for hereunder  
2 shall be required to have had a special training in the  
3 diagnosis of insanity and mental defect for duty in connec-  
4 tion with the examination of arriving aliens with special  
5 reference to the detection of mental defection;”;

6 The proviso at the end of the twelfth paragraph under  
7 the heading “Public Health Service” in chapter 3, 38 Stat-  
8 utes at Large 4, which appears at page 24 and which reads as  
9 follows: “*Provided*, That hereafter commissioned officers and  
10 pharmacists, and those employees of the Service devoting all  
11 their time to field work, shall be entitled to hospital relief  
12 when taken sick or injured in line of duty”;

13 The last clause of chapter 124, 38 Statutes at Large 387,  
14 which reads as follows: “and the said Secretary is hereby  
15 authorized to detail for duty on revenue cutters such sur-  
16 geons and other persons of the Public Health Service as he  
17 may deem necessary”;

18 Section 5 of chapter 414, 39 Statutes at Large 536, at  
19 page 538;

20 Chapter 26, 39 Statutes at Large 872;

21 That portion of section 16 of chapter 29, 39 Statutes at  
22 Large 874, which appears at page 885 and which reads as  
23 follows: “who shall have had at least two years’ experience  
24 in the practice of their profession since receiving the degree  
25 of doctor of medicine, and”;

1       The sixth paragraph under the heading "Public Health  
2 Service" in chapter 3, 40 Statutes at Large 2, at page 6;

3       The seventh paragraph under the heading "Bureau of  
4 Mines" in chapter 27, 40 Statutes at Large 105, which is  
5 the third full paragraph appearing on page 146;

6       Chapter 37, 40 Statutes at Large 242;

7       The proviso in the fourth paragraph under the heading  
8 "Public Health Service" in chapter 113, 40 Statutes at  
9 Large 634, which appears at page 644 and which reads as  
10 follows: "*Provided*, That the pay of attendants at marine  
11 hospitals, quarantine, and immigration stations, whose pres-  
12 ent compensation is less than the rate of \$1,200 per annum,  
13 may be increased to a rate not to exceed \$1,200 per  
14 annum";

15       The proviso in the eleventh paragraph under the head-  
16 ing "Public Health Service" in chapter 113, 40 Statutes at  
17 Large 634, which appears at page 644 and which reads as  
18 follows: "*Provided*, That the Public Health Service, from  
19 and after July first, nineteen hundred and eighteen, shall  
20 pay to Saint Elizabeths Hospital the actual per capita cost of  
21 maintenance in the said hospital of patients committed by  
22 that Service";

23       The sixtieth paragraph under the heading "Bureau of  
24 Fisheries" in chapter 113, 40 Statutes at Large 634, which  
25 is the fourth full paragraph appearing on page 694;

1 Sections 1, 3, 4, 6, and 7 of chapter XV of chapter 143,  
2 40 Statutes at Large 845, at page 886;

3 The thirteenth paragraph under the heading "General  
4 Expenses, Bureau of Chemistry" in chapter 178, 40 Statutes  
5 at Large 973, which is the second full paragraph appearing  
6 on page 992;

7 Section 2 of chapter 179, 40 Statutes at Large 1008;  
8 Chapter 196, 40 Statutes at Large 1017;

9 Chapter 98, 40 Statutes at Large 1302;

10 The last paragraph under the heading "Public Health  
11 Service" in chapter 6, 41 Statutes at Large 35, which is the  
12 sixth full paragraph appearing on page 45;

13 The proviso at the end of the first paragraph under the  
14 heading "Public Health Service" in chapter 94, 41 Statutes  
15 at Large 503, which appears at page 507, and which reads  
16 as follows: "*Provided*, That the Secretary of the Treasury  
17 is authorized to make regulations governing the disposal of  
18 articles produced by patients in the course of their curative  
19 treatment, either by allowing the patient to retain same or  
20 by selling the articles and depositing the money received to  
21 the credit of the appropriation from which the materials for  
22 making the articles were purchased";

23 The second paragraph under the heading "Public Health  
24 Service" in chapter 94, 41 Statutes at Large 503, which is  
25 the seventh full paragraph appearing on page 507;

1       The last paragraph under the heading "Public Health  
2 Service" in chapter 94, 41 Statutes at Large 503, which is  
3 the seventh full paragraph appearing on page 508, and the  
4 substantially similar provisions in chapter 161, 41 Statutes  
5 at Large 1367, at page 1378;

6       The fourth paragraph under the heading "Quarantine  
7 Stations" in chapter 235, 41 Statutes at Large 874, which is  
8 the eighth full paragraph appearing on page 875;

9       The third paragraph under the heading "Public Health  
10 Service" in chapter 235, 41 Statutes at Large 874, which  
11 is the ninth full paragraph appearing on page 883;

12       Chapter 80, 41 Statutes at Large 1149;

13       The second paragraph under the heading "Public Health  
14 Service" in chapter 23, 42 Statutes at Large 29, which is  
15 the thirteenth full paragraph appearing on page 38;

16       The proviso at the end of section 4 of chapter 57, 42  
17 Statutes at Large 147, which appears at page 148, and which  
18 reads as follows: "*Provided*, That all commissioned personnel  
19 detailed or hereafter detailed from the United States Public  
20 Health Service to the Veterans' Bureau, shall hold the same  
21 rank and grade, shall receive the same pay and allowances,  
22 and shall be subject to the same rules for relative rank and  
23 promotion as now or hereafter may be provided by law for  
24 commissioned personnel of the same rank or grade or per-



1 forming the same or similar duties in the United States Pub-  
2 lic Health Service”;

3 The ninth paragraph under the heading “Bureau of  
4 Mines”, in chapter 199, 42 Statutes at Large 552, which is  
5 the fourth full paragraph on page 588, and the substantially  
6 similar provisions in chapter 42, 42 Statutes at Large 1174,  
7 at page 1210; chapter 264, 43 Statutes at Large 390, at  
8 page 422; chapter 462, 43 Statutes at Large 1141, at page  
9 1175;

10 The last sentence of the paragraph under the heading  
11 “Public Health Service” in chapter 258, 42 Statutes at Large  
12 767, which appears at page 776 and which reads as follows:  
13 “The Immigration Service shall reimburse the Public Health  
14 Service on the basis of per capita rates fixed by the Secre-  
15 tary of the Treasury and the sums received by the Public  
16 Health Service from this source shall be covered into the  
17 Treasury as miscellaneous receipts”;

18 The first proviso at the end of the ninth paragraph under  
19 the heading “Public Health Service” in chapter 84, 43  
20 Statutes at Large 64, which appears at page 75 and which  
21 reads as follows: “*Provided*, That the Immigration Service  
22 shall permit the Public Health Service to use the hospitals  
23 at Ellis Island Immigration Station for the care of the  
24 Public Health Service patients, free of expense for physi-  
25 cal upkeep, but with a charge of actual cost for fuel, light,

1 water, telephone, and similar supplies and services, to be  
 2 covered into the proper Immigration Service appropria-  
 3 tions; and moneys collected by the Immigration Service  
 4 on account of hospital expenses of persons detained under  
 5 the immigration laws and regulations at Ellis Island Immi-  
 6 gration Station shall be covered into the Treasury as  
 7 miscellaneous receipts:"

8 and substantially similar provisions under the heading "Public  
 9 Health Service" in chapter 87, 43 Statutes at Large 763,  
 10 at page 775; chapter 43, 44 Statutes at Large 136, at  
 11 page 147; chapter 126, 45 Statutes at Large 162, at page  
 12 174; chapter 39, 45 Statutes at Large 1028, at page 1039;  
 13 chapter 289, 46 Statutes at Large 335, at page 347; chapter  
 14 110, 49 Statutes at Large 218, at page 229; chapter 725,  
 15 49 Statutes at Large 1827, at page 1839; chapter 180, 50  
 16 Statutes at Large 137, at page 149; chapter 55, 52 Statutes  
 17 at Large 120, at page 133; chapter 428, 54 Statutes at Large  
 18 574, at page 585; chapter 269, 55 Statutes at Large 466, at  
 19 page 481; and chapter 475, 56 Statutes at Large 562, at  
 20 page 581;

21 Chapter 146, 43 Statutes at Large 809;

22 The words "and public health" in the last sentence of  
 23 section 7 (b) of chapter 344, 44 Statutes at Large 568, at  
 24 page 572;

25 The words "or public-health" ~~wherever they appear~~ in

1 the second sentence of section 11 (b) (2) of chapter 344,  
2 44 Statutes at Large 568, at page 574, as amended;

3 Section 3 of chapter 371, 44 Statutes at Large 622, at  
4 page 626;

5 Chapter 625, 45 Statutes at Large 603;

6 The proviso at the end of the fifth paragraph under the  
7 heading "Public Health Service" in chapter 39, 45 Statutes  
8 at Large 1028, which appears at page 1039, and which reads  
9 as follows: "*Provided*, That funds expendable for transpor-  
10 tation and traveling expenses may also be used for prepara-  
11 tion for shipment and transportation to their former homes  
12 of remains of officers who die in line of duty",

13 and substantially similar provisions appearing under the  
14 heading "Public Health Service" in chapter 289, 46 Statutes  
15 at Large 335, at page 346; chapter 110, 49 Statutes at Large  
16 218, at page 228; *chapter 725, 49 Statutes at Large 1827,*  
17 *at page 1839*; chapter 180, 50 Statutes at Large 137, at  
18 page 148; chapter 55, 52 Statutes at Large 120, at page 132;  
19 chapter 428, 54 Statutes at Large 574, at page 584; chap-  
20 ter 269, 55 Statutes at Large 466, at page 480;

21 Chapter 82, 45 Statutes at Large 1085;

22 The second paragraph under the heading "Government  
23 in the Territories" in chapter 707, 45 Statutes at Large 1623,  
24 which is the seventh full paragraph on page 1644;

25 So much of chapter 70, 46 Statutes at Large 81, as

1 reads: “, and at his discretion to permit the erection of other  
2 buildings which may in the future be donated to promote  
3 the welfare of patients and personnel”;

4 Chapter 125, 46 Statutes at Large 150;

5 Chapter 320, 46 Statutes at Large 379;

6 Section 4 of chapter 488, 46 Statutes at Large 585;

7 Chapter 597, 46 Statutes at Large 807;

8 Chapter 409, 46 Statutes at Large 1491;

9 The words “or public health” in the last sentence of  
10 section 2 of chapter 656, 48 Statutes at Large 1116;

11 The ninth paragraph under the heading “Public Health  
12 Service” in chapter 110, 49 Statutes at Large 218, which is  
13 the second full paragraph appearing on page 229;

14 Title VI of chapter 531, 49 Statutes at Large 620. at  
15 page 634;

16 Chapter 161, 49 Statutes at Large 1185;

17 That portion of chapter 550, 49 Statutes at Large 1514,  
18 which reads as follows: “or of the United States Public  
19 Health Service”;

20 The proviso at the end of the thirteenth paragraph under  
21 the heading “Public Health Service” in chapter 725, 49  
22 Statutes at Large 1827, which appears at page 1840 and  
23 which reads as follows: “*Provided*, That on and after July 1,  
24 1936, the Narcotic Farm at Lexington, Kentucky, shall be  
25 known as United States Public Health Service Hospital,



1 Lexington, Kentucky, but such change in designation shall  
 2 not affect the status of any person in connection therewith  
 3 or the status of such institution under any Act applicable  
 4 thereto”;

5 The fourth paragraph under the heading “Public Health  
 6 Service” in chapter 180, 50 Statutes at Large 137, which is  
 7 the sixth full paragraph on page 148;

8 Section 2 of chapter 545, 50 Statutes at Large 547, at  
 9 page 548;

10 Chapter 565, 50 Statutes at Large 559;

11 The first proviso in the paragraph having the subhead  
 12 “Division of Mental Hygiene” under the heading “Public  
 13 Health Service” in chapter 55, 52 Statutes at Large 120,  
 14 which appears at page 134 and which reads as follows:  
 15 “*Provided*, That on and after July 1, 1938, the United States  
 16 Narcotic Farm, Fort Worth, Texas, shall be known as  
 17 United States Public Health Service Hospital of Fort Worth,  
 18 Texas, but such change in designation shall not affect the  
 19 status of any person in connection therewith or the status  
 20 of such institution under any Act applicable thereto.”;

21 Chapter 267, 52 Statutes at Large 439;

22 Chapter 92, 53 Statutes at Large 620;

23 Chapter 606, 53 Statutes at Large 1266;

24 Chapter 636, 53 Statutes at Large 1338;

1 Section 509 of chapter 666, 53 Statutes at Large 1360,  
2 at page 1381;

3 Section 205 (b) of Reorganization Plan Numbered I,  
4 53 Statutes at Large 1423, at page 1425;

5 Chapter 566, 54 Statutes at Large 747;

6 The fourth paragraph under the heading "Public Health  
7 Service" in Public Law 11, Seventy-eighth Congress,—at  
8 page 4; and

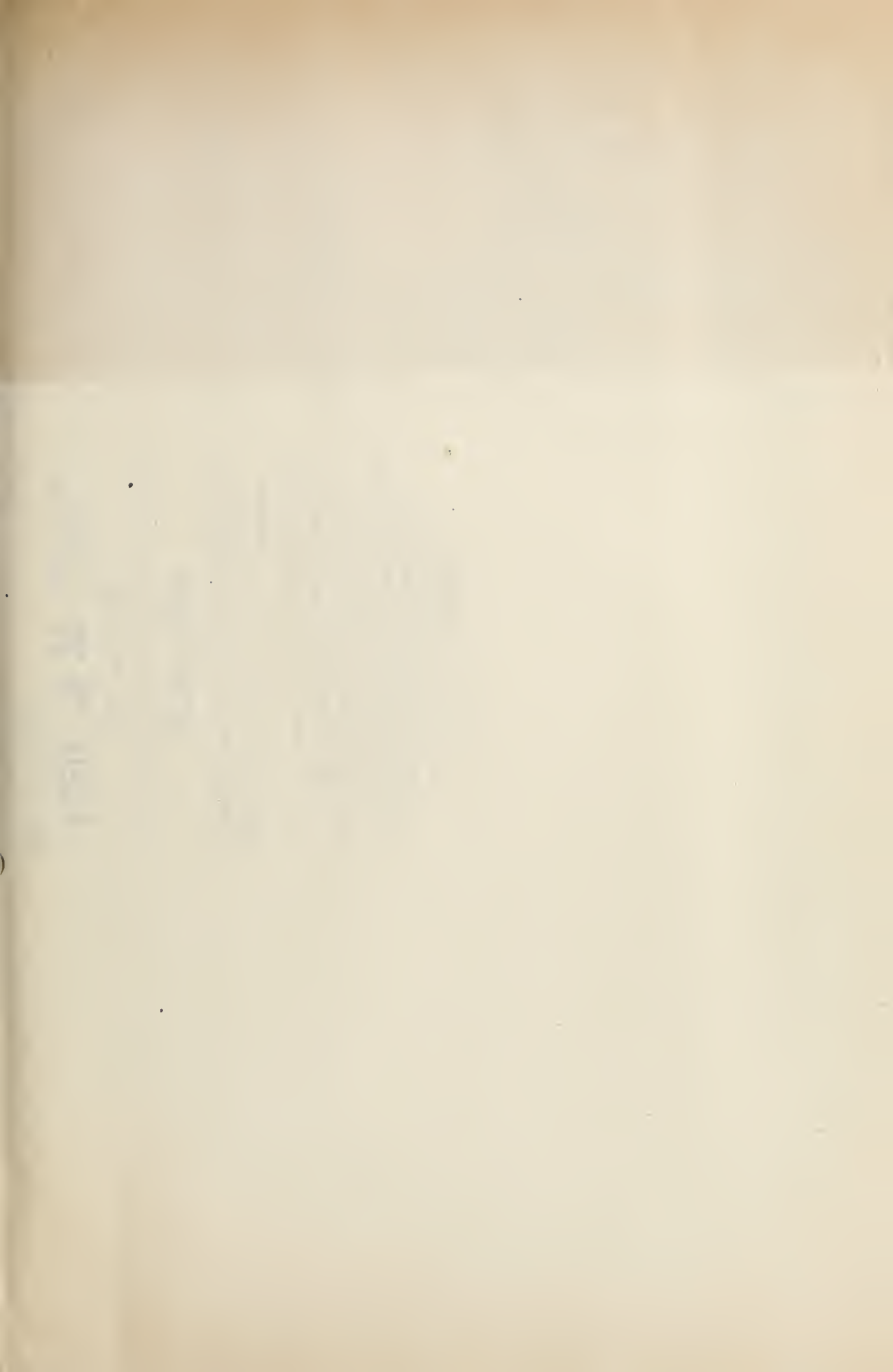
9 Public Law 184, Seventy-eighth Congress.

10 PRESERVATION OF RIGHTS AND LIABILITIES

11 SEC. 612. The repeal of the several statutes or parts  
12 of statutes accomplished by section 611 shall not affect any  
13 act done, or any right accruing or accrued, or any suit or  
14 proceeding had or commenced in any civil cause, before  
15 such repeal, but all rights and liabilities under the statutes  
16 or parts thereof so repealed shall continue, and may be  
17 enforced in the same manner, as if such repeal had not been  
18 made.

Passed the House of Representatives May 22, 1944.

Attest: SOUTH TRIMBLE,  
*Clerk.*



[Report No. 1027]

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## **AN ACT**

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To consolidate and revise the laws relating to the Public Health Service, and for other purposes.

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MAY 23 (legislative day, MAY 9), 1944

Read twice and referred to the Committee on Commerce

JUNE 16 (legislative day, MAY 9), 1944

The Committee on Commerce discharged, and referred to the Committee on Education and Labor

JUNE 21 (legislative day, MAY 9), 1944

Reported with amendments







The bill was ordered to be engrossed for a third reading, read the third time, and passed.

FRED A. DIMLER AND GWENDOLYN E. DIMLER

The bill (S. 1995) for the relief of Fred A. Dimler and Gwendolyn E. Dimler, his wife, was considered, ordered to be engrossed for a third reading, read the third time, and passed, as follows:

*Be it enacted, etc.,* That the Secretary of the Treasury be, and he is hereby, authorized and directed to pay out of any money in the Treasury not otherwise appropriated, to Fred A. Dimler and Gwendolyn E. Dimler the amount of \$2,030.16, in full settlement of all claims against the United States for the value of personal property destroyed by fire while stored in a Government building in Alaska: *Provided*, That no part of the amount appropriated in this act in excess of 10 percent thereof shall be paid or delivered to or received by any agent or attorney on account of services rendered in connection with this claim, and the same shall be unlawful, any contract to the contrary notwithstanding. Any person violating the provisions of this act shall be deemed guilty of a misdemeanor and upon conviction thereof shall be fined in any sum not exceeding \$1,000.

APPROPRIATIONS FOR THE DEPARTMENT OF LABOR, THE FEDERAL SECURITY AGENCY, AND RELATED INDEPENDENT AGENCIES—CONFERENCE REPORT

Mr. McKELLAR submitted the following report:

The committee of conference on the disagreeing votes of the two Houses on the amendments of the Senate to the bill (H. R. 4899) making appropriations for the Department of Labor, the Federal Security Agency, and related independent agencies, for the fiscal year ending June 30, 1945, and for other purposes, having met, after full and free conference, have agreed to recommend and do recommend to their respective Houses as follows:

That the Senate recede from its amendments numbered 1, 5, 9, 13, 23, 24, and 25.

That the House recede from its disagreement to the amendments of the Senate numbered 3, 4, 6, 7, 10, 15, 16, 17, 22, 26, 27, 28, 29, and 30, and agree to the same.

Amendment numbered 8: That the House recede from its disagreement to the amendment of the Senate numbered 8, and agree to the same with an amendment as follows: In lieu of the sum proposed insert "\$255,000"; and the Senate agree to the same.

Amendment numbered 11: That the House recede from its disagreement to the amendment of the Senate numbered 11, and agree to the same with an amendment as follows: In lieu of the number proposed insert "2½"; and the Senate agree to the same.

Amendment numbered 12: That the House recede from its disagreement to the amendment of the Senate numbered 12, and agree to the same with an amendment as follows: In line 2 of the matter proposed to be inserted by such amendment after the word "out", and before the comma, insert "and completing"; and the Senate agree to the same.

Amendment numbered 18: That the House recede from its disagreement to the amendment of the Senate numbered 18, and agree to the same with an amendment as follows: In lieu of the sum proposed insert "\$29,000,000"; and the Senate agree to the same.

Amendment numbered 20: That the House recede from its disagreement to the amendment of the Senate numbered 20, and agree to the same with an amendment as follows: In lieu of the sum proposed insert "\$1,500,000"; and the Senate agree to the same.

The committee of conference report in disagreement amendments numbered 2, 14, 19, 21, and 31.

KENNETH McKELLAR,  
RICHARD B. RUSSELL,  
WALLACE H. WHITE, Jr.,  
CLYDE M. REED,  
*Managers on the part of the Senate.*

BUTLER B. HARE,  
M. C. TARVER,  
ALBERT THOMAS,  
CLINTON P. ANDERSON,  
ALBERT J. ENGEL,  
H. CARL ANDERSEN,  
*Managers on the part of the House.*

Mr. McKELLAR. I ask unanimous consent for the immediate consideration of the report.

The ACTING PRESIDENT pro tempore. Is there objection?

There being no objection, the report was considered and agreed to.

The ACTING PRESIDENT pro tempore laid before the Senate a message from the House of Representatives announcing its action on certain Senate amendments, which was read, as follows: IN THE HOUSE OF REPRESENTATIVES, U. S.,

June 22, 1944.

*Resolved*, That the House recede from its disagreement to the amendments of the Senate numbered 2, 21, and 31 to the bill (H. R. 4899) making appropriations for the Department of Labor, the Federal Security Agency, and related independent agencies, for the fiscal year ending June 30, 1945, and for other purposes, and concur therein;

That the House recede from its disagreement to the amendment of the Senate numbered 14 to said bill and concur therein with an amendment as follows: In lieu of the sum named in said amendment, insert "\$175,000."

That the House recede from its disagreement to the amendment of the Senate numbered 19 to said bill and concur therein with an amendment as follows: At the end of the matter inserted by said Senate engrossed amendment, before the period, insert "*Provided further*, That any personal property formerly belonging to the National Youth Administration and loaned to any public school, school system, or institution of higher education within any State under the provisions of Public Law 140, Seventy-eighth Congress, under the heading 'War Manpower Commission,' shall vest in, be, and become the property of such school, school system, or institution of higher education in which such property is located."

Mr. McKELLAR. I move that the Senate concur in the amendments of the House to the amendments of the Senate numbered 14 and 19.

The motion was agreed to.

Mr. McKELLAR. That completes the bill, as I understand, and it now goes to the President.

The PRESIDING OFFICER (Mr. MURDOCK in the chair). The Chair understands that completes legislative action on the bill.

The clerk will state the next bill on the calendar.

G. H. GARNER

The Senate proceeded to consider the bill (H. R. 1963) for the relief of G. H. Garner, which had been reported from the Committee on Claims with amendments, on page 1, line 6, after the words "sum of", to strike out "\$2,500" and insert "\$1,250"; in line 7, after the word "for", to strike out "the loss of the sight

of one eye; the said G. H. Garner having lost sight in one eye by reason of an injury in an automobile" and insert "personal injuries sustained by him as the result of an accident."

The amendments were agreed to.

The amendments were ordered to be engrossed, and the bill to be read the third time.

The bill was read the third time and passed.

MRS. HAGAR SIMPSON AND OTHERS

The Senate proceeded to consider the bill (H. R. 2006) for the relief of Mrs. Hagar Simpson, Mrs. Nat Price, Junior, and Griffin Brothers Clinic, which had been reported from the Committee on Claims with an amendment on page 1, line 6, after the name "Texas", to insert "and"; and in line 8, after the word "injuries", to insert "and medical and hospital expenses."

The amendments were agreed to.

The amendments were ordered to be engrossed, and the bill to be read a third time.

The bill was read the third time and passed.

The title was amended so as to read: "An act for the relief of Mrs. Hagar Simpson and Mrs. Nat Price, Junior."

L. M. FELLER CO. AND WENDELL C. GRAUS

The bill (H. R. 4528) for the relief of L. M. Feller Co., and Wendell C. Graus, was considered, ordered to a third reading, read the third time, and passed.

ROSS ENGINEERING CO.

The bill (H. R. 2965) for the relief of Ross Engineering Co., was considered, ordered to a third reading, read the third time, and passed.

JOHN M. O'CONNELL

The bill (H. R. 2530) for the relief of John M. O'Connell was considered, ordered to a third reading, read the third time, and passed.

KATHERINE SCHERER

The Senate proceeded to consider the bill (H. R. 3929) for the relief of Katherine Scherer, which had been reported from the Committee on Claims with an amendment on page 1, line 5, after the words "sum of", to strike out "\$5,215" and insert "\$2,200.85."

The amendment was agreed to.

The amendment was ordered to be engrossed, and the bill to be read a third time.

The bill was read the third time and passed.

ESTATE OF NELSON HAWKINS

The bill (H. R. 3281) for the relief of the estate of Nelson Hawkins, was considered, ordered to a third reading, read the third time, and passed.

J. WILLIAM INGRAM

The bill (H. R. 3481) for the relief of J. William Ingram, was considered, ordered to a third reading, read the third time, and passed.

WILLIAM DYER

The bill (H. R. 3280) for the relief of William Dyer, was considered, ordered



to a third reading, read the third time, and passed.

#### ELIZABETH POWERS LONG

The bill (H. R. 2151) for the relief of Elizabeth Powers Long was considered, ordered to a third reading, read the third time, and passed.

#### LUELLA F. STEWART

The bill (S. 1717) for the relief of Luella F. Stewart, was considered, ordered to a third reading, read the third time, and passed, as follows:

*Be it enacted etc.,* That the Comptroller General of the United States is hereby authorized and directed to credit the account of Luella F. Stewart, former postmaster at Bottineau, N. Dak., in the sum of \$1,153.30, the amount due the United States on account of loss of post-office funds resulting from the failure of the Bottineau County Bank, Bottineau, N. Dak., which closed September 27, 1923.

#### MR. AND MRS. JOHN CUSHMAN

The bill (H. R. 4197) for the relief of Mr. and Mrs. John Cushman was considered, ordered to a third reading, read the third time, and passed.

#### ESTATE OF CARLOS PÉREZ AVILÉS

The bill (H. R. 3539) for the relief of the estate of Carlos Pérez Avilés, was considered, ordered to a third reading, read the third time, and passed.

#### MRS. SAMUEL M. McLAUGHLIN

The bill (H. R. 2333) for the relief of Mr. Samuel M. McLaughlin, was considered, ordered to a third reading, read the third time, and passed.

#### MRS. JOHN ANDREW GODWIN

The bill (H. R. 3586) for the relief of Mrs. John Andrew Godwin, was considered, ordered to a third reading, read the third time, and passed.

#### JOSEPHINE GUIDONI

The bill (H. R. 3636) for the relief of Josephine Guidoni, was considered, ordered to a third reading, read the third time, and passed.

#### BRIDGE ACROSS THE MISSOURI RIVER AT NEBRASKA CITY, NEBR.

The bill (H. R. 4041) to amend the act relating to the construction and maintenance of a bridge across the Missouri River at or near Nebraska City, Nebr., was considered, ordered to a third reading, read the third time, and passed.

#### MULTIPLE TAXATION OF AIR COMMERCE

The bill (H. R. 4935) to provide for a study of multiple taxation of air commerce, and for other purposes, was considered, ordered to a third reading, read the third time, and passed.

#### REVISION OF LAWS RELATING TO PUBLIC HEALTH SERVICE

The bill (H. R. 4624) to consolidate and revise the laws relating to the Public Health Service, and for other purposes, was announced as next in order.

Mr. REVERCOMB. I ask that the bill be passed over.

The ACTING PRESIDENT pro tempore. The bill will be passed over.

Mr. THOMAS of Utah. Mr. President, I trust the Senator from West Virginia will not ask that the bill go over. I should like to make an explanation of it,

if he wishes. It is a bill which is needed about as badly as any measure we can think of. It is a bill which has been worked upon for at least 2 years by a committee of the House of Representatives, and it passed the House of Representatives unanimously. It was reported from the Senate Committee on Education and Labor unanimously. It does not in any way, with the exception of the provision with respect to tuberculosis, add to the expenses of the Government. The tuberculosis section was adopted by the House of Representatives unanimously, and has been reported favorably by the Committee on Education and Labor of the Senate. There was not a single person who appeared against it in the hearings held in the House of Representatives or the hearing held in the Senate.

Mr. REVERCOMB. Mr. President, will the Senator yield?

Mr. THOMAS of Utah. I am glad to yield.

Mr. REVERCOMB. I may say that I do not know what the bill contains. There is no print of it on my desk. I have not been able to find it. My docket and my book of printed bills ends with Calendar No. 1043. The title of the bill which is being discussed by the able Senator from Utah is "An act to consolidate and revise the laws relating to the Public Health Service." I certainly should want to have an opportunity to see the bill and to learn what is in it before we pass it on the Consent Calendar.

Mr. THOMAS of Utah. Of course, Mr. President, no one can object to what the Senator from West Virginia has just stated. However, the bill has been printed, it has been available, it has been studied, but the new printing, with the amendments which were added, has not been sent to the Printing Office for some reason. I do not know what the reason is.

If the Senator will look at the report, he will find that every change is noted by page and by line in the most minute detail. That was done, because there has been the closest cooperation between the Senate committee and the House committee, and every amendment submitted to our committee received the informal approval of the House committee before we considered it and before it was put into the bill.

This bill is a codification of laws which have been in existence since before the Constitution of the United States, as public-health legislation started in the Continental Congress. We now find ourselves in the war emergency, and discover conditions as they are, and realize, for example, that there has not been adequate inspection of a single boat during wartime, that our boys are coming home from all parts of the world, and we can appreciate that the risks to our country are so great that to delay action at this time is deemed hazardous by the public-health authorities.

The bill was given careful consideration by both the House committee and the Senate committee. It was carefully studied. It does not add to the law of the land, nor does it take away from the law of the land, but merely brings the

law up to date, in such a way that one of the most vital and most necessary agencies of our Government may operate unhampered, at a time when our country is really imperiled. The tuberculosis provision alone shows that, and there are coming back to our country from all parts of the world men afflicted with malaria and other sicknesses.

Mr. REVERCOMB. Will the Senator yield further?

Mr. THOMAS of Utah. I yield.

Mr. REVERCOMB. I am not doubting for a moment that the able Senator has the views he expresses about the bill. I do not know what is in the bill. The print is not here. I do not think any other Senators know what is contained in the bill, and I do not wish to agree to the passage of a measure without adequate consideration by the Senate, and when we do not even have a print before us.

Let me say to the Senator that there is no one in this Chamber more interested than I in looking after the public health and the welfare of the citizens of this country, and particularly those engaged in the armed service, but I must ask that the bill go over during the consideration of measures on the Consent Calendar, until I at least have an opportunity to discuss it with the Senator from Utah. That is my feeling about this subject, as it would be about any other subject of legislation.

Mr. THOMAS of Utah. I am wondering whether the Senator from West Virginia would be willing to have the bill taken up tomorrow under special order, or would consent to some arrangement. If I were not so sure that the Senator from West Virginia could find no objection, and will find no objection, I would not press it, but never has a bill been more carefully examined than has this bill by the Committee on Interstate and Foreign Commerce of the House of Representatives. I know of that study because it has been going on for over 2 years, and I introduced a companion bill, and the Senate committee has been studying it at the same time.

Mr. REVERCOMB. If the Senator will yield further, I wish to point out, from the report, that we are dealing with the codification of laws applicable to the Public Health Service which are the result of the accumulation over a century and a half of a great number of enactments. However meritorious the bill may be from the viewpoint of the Senator from Utah, for whose opinion I have great respect, I care not how meritorious it may be from the viewpoint of those who are managing the bill on the floor, we should have opportunity to consider it, and we should not let it pass without consideration. That is why at this time I ask that the bill go over. I wish to discuss it with the Senator from Utah or with someone else interested in the bill.

Mr. GEORGE. Mr. President, this bill is voluminous, as a document. When the bill passed the House and came to the Senate, there was some question of the committee jurisdiction, and perhaps the fact that a similar or identical bill had been introduced by the distinguished Senator from Utah was overlooked. At



any rate, some question arose with the Presiding Officer of the Senate as to whether the bill should go to the Finance Committee, because it dealt with customs, or should go to the Committee on Commerce, because it was considered by the Committee on Interstate and Foreign Commerce in the House.

I looked into the bill, made some examination of it, and gave it some scrutiny to see whether it was a mere codification or clarification, and was intended to be that only, without adding new laws. I reached the conclusion that it was, just as the Senator from Utah has stated. I suggested to the Presiding Officer that the bill be referred to the Committee on Commerce, thinking that that committee was the only other committee which perhaps would have jurisdiction.

Subsequently, on the motion of the Committee on Commerce, the bill was referred to the Committee on Education and Labor, and the chairman of the Committee on Commerce brought the matter to my attention. So I have looked into the bill from time to time, and I believe the Senator from West Virginia might very well satisfy himself by tomorrow of the contents of the bill, and might conclude that it is a highly desirable piece of legislation. I hope very much the Senator can do so by tomorrow. I am sure the Senator from Utah will be very glad to enter into conference with the Senator from West Virginia.

Mr. HILL. Mr. President, I concur in what the Senator from Georgia has stated. I happen to be the chairman of the subcommittee of the Committee on Education and Labor which held hearings on the bill. What the Senator from Georgia has said is absolutely correct. This is a codification of existing law, without new matter, except the tuberculosis provision to which the Senator from Utah has called attention. The provision with reference to tuberculosis has already passed the House of Representatives in a separate bill.

As the Senator from Utah has said, the bill has been most carefully considered. The subcommittee of the House Committee on Interstate and Foreign Commerce, of which Representative BULWINKLE is chairman, gave the bill long and careful consideration, and the minority was ably represented by the distinguished Representative from Ohio, Mr. BROWN.

I know that both Representative BROWN and Representative BULWINKLE have worked for a long time on this bill. The subcommittee of the Senate committee, in giving it consideration, have kept in touch with both Representative BULWINKLE and Representative BROWN. The subcommittee of the House committee reported the bill unanimously to the full committee, the full committee reported the bill unanimously to the House, and the House passed the bill by unanimous vote.

Mr. REED. Mr. President, a parliamentary inquiry.

The PRESIDING OFFICER. The Senator will state it.

Mr. REED. Are we proceeding under the 5-minute rule?

Mr. HILL. Mr. President, I would not expect my friend the Senator from Kansas to ask that question. There might be some Senators whom I could expect to ask such a question, but not my friend the Senator from Kansas. If he will withhold his inquiry for a moment, I wish to urge the Senator from West Virginia to give the bill his prompt consideration, and let us see if we cannot pass the bill so it will become law before the Senate recesses. There are many compelling reasons why the measure should be passed quickly.

Mr. REVERCOMB. Mr. President, I shall insist that the bill go over, but at the same time I will give it my consideration, and will discuss it with the Senator from Utah or any other Senators interested in the passage of the proposed legislation, today if possible.

Mr. THOMAS of Utah. Mr. President, I shall request that the bill be considered tomorrow. I give notice that I will call it up tomorrow, because it is a matter on which action is necessary immediately, and I feel we are justified in requesting consideration of the measure tomorrow.

#### AMENDMENTS TO INTERSTATE COMMERCE ACT

Mr. REED. Mr. President, I ask unanimous consent to revert to Calendar No. 918, Senate bill 1473.

The PRESIDING OFFICER. Is there objection? The Chair hears none, and it is so ordered.

Mr. REED. Mr. President, the senior Senator from Michigan [Mr. VANDENBERG] objected to the bill when it was reached on the calendar. He now informs me that he has no objection to consideration of the bill, and I should like to take about 2 minutes to explain the bill, and I hope there will be no objection thereafter to consideration of it.

The purpose of the bill is to place express companies on the same basis with respect to extending credit to shippers as railroad companies now are. The other provisions of the bill are mainly suggestions to the Interstate Commerce Commission for some slight modification in formal procedure. Were the Senator from Montana present he would urge the passage of the bill. However, he is not here now. I am quite familiar with the measure. I can say to the Senate that there is nothing controversial in the bill.

Mr. WHITE. Mr. President, will the Senator yield?

Mr. REED. Certainly.

Mr. WHITE. As I understand the situation, under the present law railroad carriers are authorized to extend credit to their clients or customers, whatever the correct expression may be, and the main purposes of the bill in question are to extend the same privilege to express companies; that is, to permit them to extend charge accounts.

Mr. REED. I would not want the Senator to understand that that is all the bill provides, but I will say that that is one of the main purposes.

Mr. WHITE. There are other purposes, but that is the main purpose?

Mr. REED. The express companies will then be brought into a better situation

than they now occupy with respect to filing tariffs, and so forth.

The PRESIDING OFFICER. Is there objection to the present consideration of the bill?

There being no objection, the Senate proceeded to consider the bill (S. 1473) to amend the Interstate Commerce Act, as amended, which had been reported from the Committee on Interstate Commerce with amendments.

The first amendment was, in section 1, on page 2, line 5, after the word "freight", to insert "or express shipments"; and at the end of the section to add a new proviso, so as to make the section read:

That the first sentence of paragraph (2) of section 3 of the Interstate Commerce Act, as amended, is amended to read as follows:

"(2) No carrier by railroad and no express company subject to the provisions of this part shall deliver or relinquish possession at destination of any freight or express shipment transported by it until all tariff rates and charges thereon have been paid, except under such rules and regulations as the Commission may from time to time prescribe to govern the settlement of all such rates and charges and to prevent unjust discrimination: *Provided*, That the provisions of this paragraph shall not be construed to prohibit any carrier or express company from extending credit in connection with rates and charges on freight or express shipments transported for the United States, for any department, bureau, or agency thereof, or for any State or Territory or political subdivision thereof, or for the District of Columbia: *Provided further*, That the provisions of this paragraph with respect to express companies and express shipments shall not become applicable until October 1, 1944."

The amendment was agreed to.

The next amendment was, in section 2, page 2, line 19, after the word "notice", to insert "of the suspension of a tariff or schedule"; in line 21, after the word "filed", to strike out "a" and insert "said"; and in line 24, after the word "notice", to insert "of the suspension of a joint tariff or schedule"; on page 3, line 1, after the word "filed", to strike out "a" and insert "said"; in line 2, before the word "naming", to strike out "party," and insert "party"; and in line 9, before the word "title", to insert "1940 edition", so as to make the section read:

Sec. 2. Paragraph (5) of section 16 of the Interstate Commerce Act, as amended, is amended to read as follows:

"(5) Every order of the Commission shall be forthwith served upon the designated agent of the carrier in the city of Washington or in such other manner as may be provided by law. In proceedings before the Commission involving the lawfulness of rates, fares, charges, classifications, or practices, service of notice of the suspension of a tariff or schedule upon an attorney in fact of a carrier who has filed said tariff or schedule in behalf of such carrier naming the rates, fares, charges, classifications, or practices involved in such proceedings shall be deemed to be due and sufficient service upon the carrier, and service of notice of the suspension of a joint tariff or schedule upon a carrier which has filed said joint tariff or schedule to which another carrier is a party naming the rates, fares, charges, classifications, or practices involved in such proceedings shall be deemed to be due and sufficient service upon the several carriers parties thereto. Such service of notice may be made by mail to such attorney in fact or carrier at the address shown in the tariff or



schedule. The provisions in this paragraph are additional to those made in section 6 of the act of June 18, 1910 (U. S. C., 1940 ed., title 49, sec. 50)."

The amendment was agreed to.

The next amendment was to insert a new section 4, as follows:

SEC. 4. Subparagraph (c) of paragraph (7) of section 20 of the Interstate Commerce Act is amended to read as follows:

"(c) Any carrier or lessor, or person furnishing cars or protective service, as referred to in paragraph (6) of this section, or any officer, agent, employee or representative thereof, who shall fail to make and file an annual or other report with the Commission within the time fixed by the Commission, or to make specific and full, true, and correct answer to any question within 30 days from the time it is lawfully required by the Commission so to do, shall forfeit to the United States the sum of \$100 for each and every day it shall continue to be in default with respect thereto."

The amendment was agreed to.

The next amendment was, on page 4, line 15, to change the section number from "4" to "5"; on the same page in line 21, after the word "notice", to insert "of the suspension of a tariff or schedule"; in line 23 after the word "filed", to strike out "a" and insert "said"; on page 5, line 2, after the word "notice", to insert "of the suspension of a joint tariff or schedule"; and in line 3, after the word "filed", to strike out "a" and insert "said", so as to make the section read:

SEC. 5. (a) The third sentence of subsection (a) of section 221 of the Interstate Commerce Act is amended by striking out the word "registered."

(b) The last sentence of such subsection (a) is amended to read as follows: "In proceedings before the Commission involving the lawfulness of rates, fares, charges, classifications, or practices, service of notice of the suspension of a tariff or schedule upon an attorney in fact of a carrier who has filed said tariff or schedule in behalf of such carrier naming the rates, fares, charges, classifications, or practices involved in such proceedings shall be deemed to be due and sufficient service upon the carrier and service of notice of the suspension of a joint tariff or schedule upon a carrier which has filed said joint tariff to which another carrier is a party naming the rates, fares, charges, classifications, or practices involved in such proceedings shall be deemed to be due and sufficient service upon the several carriers parties thereto, but such manner of service shall not be considered as excluding service in any other manner authorized by law."

The amendment was agreed to.

The next amendment was, on page 5, line 10, to change the section number from 5 to 6.

The amendment was agreed to.

The next amendment was on page 6 to change the section number from "6" to "7"; in line 7, after the word "notice", to insert "of the suspension of a tariff or schedule"; in line 9, after the word "filed", to strike out "a" and insert "said"; in line 12, after the word "notice", to insert "of the suspension of a joint tariff or schedule"; and in line 14, after the word "filed", to strike out "a" and insert "said", so as to make the section read:

SEC. 7. (a) The third sentence of subsection (a) of section 315 of the Interstate Commerce Act is amended by striking out the word "registered."

(b) The last sentence of such subsection (a) is amended to read as follows: "In proceedings before the Commission involving the lawfulness of rates, fares, charges, classifications, or practices, service of notice of the suspension of a tariff or schedule upon an attorney in fact of a carrier who has filed said tariff or schedule in behalf of such carrier naming the rates, fares, charges, classifications, or practices involved in such proceedings shall be deemed to be due and sufficient service upon the carrier and service of notice of the suspension of a joint tariff or schedule upon a carrier which has filed said joint tariff to which another carrier is a party naming the rates, fares, charges, classifications, or practices involved in such proceedings shall be deemed to be due and sufficient service upon the several carriers parties thereto, but such manner of service shall not be considered as excluding service in any other manner authorized by law."

The amendment was agreed to.

The next amendment was on page 6, beginning in line 20, to strike out section 7, as follows:

SEC. 7. Subsection (c) of section 411 of the Interstate Commerce Act is amended to read as follows:

"(c) After January 1, 1944, it shall be unlawful for any director, officer, employee, or agent of any common carrier subject to part I, II, or III of this Act or of any person controlling, controlled by, or under common control with such a common carrier, in his or their own personal pecuniary interest, to own, lease, control, or hold stock in, any freight forwarder, directly or indirectly, unless such ownership, lease, control, or holding shall have been authorized by order of the Commission, upon due showing, in form and manner prescribed by the Commission, that neither public nor private interests will be adversely affected thereby; but this subsection shall not forbid or preclude the holding of a director's qualifying shares of stock from which no personal pecuniary benefit is derived by the holder."

The amendment was agreed to.

The bill was ordered to be engrossed for a third reading, read the third time, and passed.

#### CLAIM OF McCULLOUGH COAL CORPORATION

Mr. TYDINGS. Mr. President, I ask unanimous consent to proceed to the consideration of Calendar 888, House bill 1519, conferring jurisdiction on the Court of Claims to hear, determine, and render judgment upon the claim of the McCullough Coal Corporation against the United States. I understand the bill went over on a previous call of the calendar day because there was no one on the floor to make an explanation of it when it was reached.

Mr. WHITE. Mr. President, I am sorry to be the bearer of ill tidings, but I have been requested to ask that that bill go over if called on the calendar, and I feel impelled to do so.

Mr. TYDINGS. Mr. President, would it be asking too much of the Senator to tell me who made the request, so I may confer with him and find out what the objection is?

Mr. WHITE. The request comes from the Senator from Connecticut [Mr. DANAHY].

The PRESIDING OFFICER. Objection is heard.

J. T. TAULBEE AND MRS. BERTIE LEILA PARKER

Mr. BARKLEY. Mr. President, I ask unanimous consent for the present consideration of House bill 1497, which was unanimously reported from the Committee on Claims earlier in the day. This is a bill to compensate for the death of a citizen caused by the negligence of the War Department. It is recommended by the Secretary of War.

The PRESIDING OFFICER. The bill will be stated by title for the information of the Senate.

The LEGISLATIVE CLERK. A bill (H. R. 1497) for the relief of J. T. Taulbee, deceased, and Mrs. Bertie Leila Parker.

The PRESIDING OFFICER. Is there objection to the present consideration of the bill?

There being no objection, the bill was considered, ordered to a third reading, read the third time, and passed.

#### ACTION BY THE WAR DEPARTMENT TO FACILITATE VOTING BY MEMBERS OF THE ARMED FORCES

Mr. GREEN. Mr. President, the War Department has delivered to the Committee on Privileges and Elections four copies of an informal compilation entitled "Action by the War Department Through June 15, 1944, in Carrying Out the Provisions of Public Law 277, Seventy-eighth Congress," together with copies of three soldier voting posters which the Army has already published and distributed. This material was assembled by the War Department for its own uses, and copies have been made available to congressional committees for their information. I believe that this information should be made available to Members of the Senate.

The compilation records a real achievement by the War Department in the short time since Public Law 277 became effective, in taking detailed action to give effect to the new act. It augurs well for an impartial opportunity being offered to most eligible soldiers, wherever they may be stationed, to vote in the November general election.

I should like to refer specifically to some of the items included in the compilation.

(a) There are included three basic orders: a War Department Bulletin, No. 5, containing the complete text of the new law—published, incidentally, on the first day the act took effect; a War Department Circular, No. 128, explaining the new law, and a War Department Circular, No. 238, dealing with voting in the general election. These orders, issued under the authority of the Secretary of War, have a distribution down to companies and similar small units all over the world.

(b) There are also included two extremely detailed and informative War Department pamphlets, for use primarily by soldier-voting officers. One is the Overseas Manual, dated June 5, and the other is the Domestic Manual, dated June 8. These are also issued under the authority of the Secretary of War and have a similar world-wide distribution.



The bill is before the Senate and open to further amendment.

Mr. REVERCOMB. Mr. President, I send to the desk an amendment and ask that it be stated.

The PRESIDING OFFICER. The amendment will be stated.

The LEGISLATIVE CLERK. On page 2, after line 20, it is proposed to insert the following new subdivision:

The service court of any friendly foreign force, as herein defined, is hereby authorized to exercise its jurisdiction within the territorial limits of the United States during the continuance of the present hostilities, and six months thereafter.

Mr. REVERCOMB. Mr. President, the language of the amendment merely states that the United States Government recognizes the service courts of friendly foreign nations, and that it will permit them to exercise such jurisdiction as they now have within the territories of this country. The amendment is so framed and phrased as to avoid the use of "exclusive" jurisdiction, although such right has been given us by the British Government.

Considerable objection was voiced to the idea of exclusive jurisdiction in the service courts, and therefore the word "exclusive" has not been used in the amendment. The amendment is merely declaratory by the Congress of law which we are advised by the State Department exists, and which, under the decisions of the Supreme Court of this country, we know to exist, with reference to a friendly army quartered in this country or while passing through it. Therefore, Mr. President, the amendment is merely an expression of the rule as the Government of this country has recognized it to exist under international law. If we are to enact legislation on the subject, let us be specific about it and tell the foreign service courts of friendly nations which have forces in this country that they may exercise within the territories of the United States such jurisdiction as they have with our consent.

The PRESIDING OFFICER. The question is on agreeing to the amendment of the Senator from West Virginia.

Mr. MURDOCK. Mr. President, will the Senator yield?

Mr. REVERCOMB. I yield.

Mr. MURDOCK. The only observation which I wish to make is this: The amendment offered by the Senator from West Virginia is an affirmative authorization of jurisdiction. That very proposal was presented to the Judiciary Committee and was voted down. All the pending bill would do would be to implement whatever jurisdiction the service courts bring with them. The agencies of our Government which are interested in the proposed legislation, and are sponsoring it as the result of an exchange of notes between our Ambassador and Mr. Eden, are taken care of, in my opinion, by the bill before us, which implements whatever jurisdiction may reside in the service courts.

In the act passed by Parliament there were no affirmative grants or jurisdiction to our courts. There was merely a prohibition of jurisdiction on the part of the criminal courts of Great Britain.

In my opinion, the amendment of the Senator from West Virginia should be voted down and the bill as now amended should be passed.

Mr. REVERCOMB. Mr. President, I can only point out to the Senate that if the language of my amendment does not represent the attitude of the Government, and if it does not provide what the foreign service courts should have, then what are we implementing? We are implementing acts dealing solely with the arrest of offenders, and the summoning of witnesses. Nothing is said in the entire bill about recognizing the right of a friendly foreign service court to exercise its jurisdiction in this country. For the benefit of Senators who were not present during the discussion had earlier in the day—

Mr. CONNALLY. Mr. President, will the Senator yield?

Mr. REVERCOMB. I will yield in a moment.

As I was about to say, for the benefit of Senators who were not present earlier in the day during the discussion concerning this bill I may say that I put a question, as I recall, to Mr. Breckenridge Long, Assistant Secretary of State, who is interested in the matter. I said, "The right of the friendly foreign service court to exercise jurisdiction in this country, under the view taken by the State Department, is under an international rule, or law, according to the views of our American Government." I asked him, "Would it in any way becloud or cast any doubt upon our position as to what international law does, or what it may be with respect to this subject, if we were specifically to declare our views through this bill, giving the right which international law already gives?" His answer was, in effect, "No; not so long as we declare our views under international law." Mr. President, that is what my amendment would do. It simply provides that the service courts of a friendly foreign force, as defined in the bill, may exercise their jurisdiction within the territories of the United States.

Mr. CONNALLY. Mr. President, is not the whole question one of permission to the foreign force to be here? We can exclude them if we desire to do so, but does not our consent to their being here carry with it incidentals, and is not one of those incidentals that the force may exercise its discipline and its control, and punish infractions on the part of its members? That being the case, why is it necessary for us specifically to provide that they can exercise their jurisdiction here? It goes back to the fundamental question of whether we shall let them be here at all. We do not have to admit them. If we permit foreign troops and foreign naval officers and naval organizations to be within the United States, the implication and the natural inference is that they can exercise their normal functions. The purpose of the bill is simply to cooperate with those functions by permitting, with our consent, of course, the summoning of civilian witnesses to attend the sessions of their service courts. As I understand, that has to be done by permission. So, in view of his erudition

and attainments, I cannot understand the Senator's anxiety about this matter, I really do not see why it is necessary at all to do what he suggests.

Mr. REVERCOMB. If the Senator's view were followed out entirely upon this subject, then the British Parliament need not have passed its law recognizing the authority of our service courts, going further than what is proposed here, and saying that we should exercise exclusive jurisdiction. If the Senator's view were correct, there would be no need of any British statute, and that would be fine. But we have an anomalous situation. We say—and this is basic—just as the Senator from Texas says, that it is the position of the Government of the United States that under international law this right exists anyway, but Great Britain takes a very different view and says in the notes that it must be enacted by parliamentary statute. I say, let us follow the same course, and declare clearly in the proposed statute that they may exercise their jurisdiction here. It is only fair to Great Britain, it is only fair to our own country, to be specific on the subject.

Mr. CONNALLY. Is it the Senator's insistence that we should write into the bill a provision that foreign-service courts should have exclusive jurisdiction?

Mr. REVERCOMB. Oh, no; I have left the word "exclusive" out of the language, as I stated before.

Mr. CONNALLY. It might be undesirable to require that it be exclusive.

Mr. FERGUSON. Mr. President, I wish to say a few words on the amendment. As I understand the bill before the Senate, it gives to the British courts, or courts of any other friendly country, two rights, one to bring defendants before them, and the other to produce witnesses.

Mr. REVERCOMB. Will the Senator yield?

Mr. FERGUSON. I yield.

Mr. REVERCOMB. At the beginning I wish to differ with the Senator's view. The bill does not give the British foreign service courts any rights. It deals with the arrest of offenders by our officers, and requires the attendance of witnesses through our courts. The very thing stated by the Senator is what I am trying to put into the bill, that the service courts may exercise their jurisdiction, such as they have, not exclusive jurisdiction, but we are asked to declare by statute what the service court may do, by our recognition of their right to be here.

Mr. FERGUSON. I take for granted that if this Government authorizes our law-enforcing officers to arrest and bring before British courts, or other friendly courts, either a defendant or a witness, we are giving them certain rights, and the particular section which would be added to the bill could be construed as authorizing the court to act specifically, and therefore might be considered by the courts of this country as conferring jurisdiction upon the particular foreign court. It is that which I think is dangerous.

Mr. REVERCOMB. The Senator from Michigan, who is an able lawyer, knows



that our Government cannot confer jurisdiction upon a foreign government's court. The only thing it can do is to say that the foreign court may exercise the jurisdiction it derives from its own government within the territory of this country; and that is what is proposed. Further, the Senator says that it specifically does that, and he is correct in that, and we should be specific, we should not leave the matter in doubt. All this language proposes, I may say to the able Senator from Michigan, is that Congress, in words, shall declare what we have said we intended to do. Let us be direct about it.

Mr. FERGUSON. Mr. President, under the Constitution, Congress has the right to create courts inferior to the Supreme Court, and when we use language such as that proposed about a body which is called a friendly foreign court, a service court, we are creating an inferior court. Congress has provided for court martial, both in the Army and Navy, and if we say that we hereby authorize a foreign service court to exercise its jurisdiction within the territorial limits of the United States, I think it can be well said that Congress is creating that court a court under the jurisdiction of and giving it authority from this particular body.

I do not think it is the purpose of the Congress to create a new court, or to confer any jurisdiction upon any other court to try these cases. Let us say that the foreign service court already has, by virtue of international law—and I think it has in fact—the right, if it is in this country, by virtue of our Nation permitting it to be here, to exercise such jurisdiction as it may have over its nationals while they are in this country and in the service of the friendly foreign country; but if we as a legislative body attempted to confer any jurisdiction other than that such a court has by international law, I think we would be going too far, and the question would immediately be raised, Is this a court from which an appeal can be taken to some of the local courts? Can a defendant go before the local courts and obtain a writ of habeas corpus? Has he the right to go before the Supreme Court for a writ of certiorari because the jurisdiction is not being exercised under what we call due process of law? No; that is not what we are trying to arrive at; that is not what we are trying to confer upon the foreign service courts. We are attempting to allow them to operate here and to exercise the jurisdiction they have under international law, not under United States law. I think we are only complicating matters. We are making it so that we shall have trouble with the court's jurisdiction, and for that reason I think we should vote down the amendment. If the court is to function here, aid it, yes, by bringing in the witnesses; aid it, yes, by bringing in the defendants, but not by conferring any separate jurisdiction upon it or giving it the right to operate here as a domestic court.

Mr. McFARLAND. I desire to compliment the Senator from Michigan upon his statement.

Mr. REVERCOMB. Mr. President, let me say that I can find no basis whatsoever in the language of this amendment for the remarks of the Senator from Michigan with respect to conferring jurisdiction. There is nothing in the bill which confers jurisdiction, and even if we tried to do it we could not confer jurisdiction upon a service court of a friendly foreign nation. We are without power to do so. The court derives jurisdiction from its own government. The only thing we are saying is, "You may come into this country and exercise your own jurisdiction." That is what international law provides. What is the difference between the declaration of the bill and international law? International law is only what the country involved recognizes. There is no written international law on the subject.

Mr. FERGUSON. Mr. President, if we use language which authorizes the court to exercise its jurisdiction here, we mean that the jurisdiction which it exercises is legal jurisdiction. Why should this body confer upon a British court, let us say, the right to come here and exercise its jurisdiction under its own rules and regulations, and at the same time approve that procedure? It may not be in conformity with our due process of law. We learned in this body the other day that an American was tried in a secret court in Britain for a felony committed there. We may not approve that in this country. Why should we authorize the court to exercise its jurisdiction here, thereby making its jurisdiction legal under the laws of this country?

Mr. REVERCOMB. If the foreign service court cannot exercise jurisdiction, then what is the bill all about? What are we implementing by the bill if the court cannot exercise its jurisdiction in this country?

Mr. FERGUSON. The foreign service court can exercise, if I may answer the Senator from West Virginia, its jurisdiction so far as its own country's laws provide for its own jurisdiction, but not under our laws. We want the court to exercise its jurisdiction under its own country's laws, and not under the laws enacted by the Congress.

Mr. REVERCOMB. Mr. President, just one more word. There is nothing in this measure which limits the time for the exercise of jurisdiction by these friendly foreign service courts, and I want to call the attention of the Senate and have it very clear in the Record that the amendment I am offering limits the right of these courts to act in this country during the existence of the present hostilities and 6 months thereafter. Unless the pending amendment shall be adopted Congress will enact a permanent law to aid friendly foreign service courts for an unlimited time.

The PRESIDING OFFICER (Mr. Hill in the chair). The question is on agreeing to the amendment of the Senator from West Virginia [Mr. REVERCOMB].

The amendment was rejected.

The PRESIDING OFFICER. The bill is to open to further amendment. If there be no further amendment, the question is on the engrossment of the

amendments and the third reading of the bill.

The amendments were ordered to be engrossed, and the bill to be read a third time.

The bill (H. R. 3241) was read the third time and passed.

#### EXTENSION OF CIVILIAN PILOT TRAINING ACT—CONFERENCE REPORT

Mr. RADCLIFFE submitted the following report:

The committee of conference on the disagreeing votes of the two Houses on the amendment of the House to the bill (S. 1432) to extend the Civilian Pilot Training Act of 1939, having met, after full and free conference, have agreed to recommend and do recommend to their respective Houses as follows:

That the Senate recede from its disagreement to the amendment of the House and agree to the same with an amendment as follows:

Strike out the figures "1945" in the last line and insert in lieu thereof the figures "1946", and the House agree to the same.

GEORGE L. RADCLIFFE,  
JAS. M. MEAD,  
R. OWEN BREWSTER

(Per GEO. L. RADCLIFFE),

Managers on the part of the Senate.

A. L. BULWINKLE,  
CLARENCE LEA,  
LINDLEY BECKWORTH,  
CHAS. A. HOLMERTON,  
FEHR G. HOLMES,

Managers on the part the House.

Mr. RADCLIFFE. Mr. President, the Senate bill provided for an extension of 5 years. The House of Representatives reduced that to 1 year. The conferees have agreed on 2 years. I move the adoption of the conference report.

The report was agreed to.

#### AMENDMENT OF THE ACT OF MAY 29, 1930

The PRESIDING OFFICER laid before the Senate a message from the House of Representatives announcing its action on certain amendments of the Senate to House bill 4292, which was read as follows:

IN THE HOUSE OF REPRESENTATIVES, U. S.,  
June 19, 1944.

Resolved, That the House agree to the amendment of the Senate numbered 2 to the bill (H. R. 4292) to amend section 12 (b) of the act of May 29, 1930, as amended; and

That the House agree to the amendment of the Senate numbered 1 to said bill, with an amendment as follows: In line 1 of the matter inserted by said Senate engrossed amendment strike out "employees" and insert "employee."

Mr. BYRD. Mr. President, I move that the Senate concur in the amendment of the House to the amendment of the Senate numbered 1. The amendment relates merely to a clerical error. The word "employees" should be "employee," singular.

The motion was agreed to.

#### CONSOLIDATION AND REVISION OF LAWS RELATING TO THE PUBLIC HEALTH SERVICE

Mr. THOMAS of Utah. Mr. President, when the calendar was called House bill 4624, Calendar No. 1045, was reached. That is the last bill on the calendar. Objection was made to consideration of the bill at the time by the Senator from



West Virginia [Mr. REVERCOMB]. We have discussed the matter with the Senator from West Virginia and other Senators, and an agreement has been reached that if one of the Senate committee amendments shall be disagreed to there will be no other objections raised to the bill.

Mr. President, since the bill is one which will need House approval, and since we have worked in harmony with the House committee with respect to it, I ask unanimous consent for immediate consideration of the bill.

The PRESIDING OFFICER. Is there objection to the present consideration of the bill?

There being no objection, the Senate proceeded to consider the bill (H. R. 4624) to consolidate and revise the laws relating to the Public Health Service, and for other purposes, which had been reported from the Committee on Education and Labor with amendments.

Mr. REVERCOMB. Mr. President, I understand it is agreed that the committee amendment on page 64 of the bill, section 371, under the heading "Training of Nurses," shall be disagreed to.

Mr. THOMAS of Utah. That is correct, Mr. President.

The PRESIDING OFFICER. The clerk will state the amendments of the committee.

The first amendment of the Committee on Education and Labor was, in section 210, on page 14, line 13, after the word "promotion," to strike out "after not more than 2 years of service" and insert "in accordance with regulations of the President."

The amendment was agreed to.

The next amendment was, in section 215, on page 22, line 12, after the word "effects", to strike out "allotments from their pay by commissioned officers."

The amendment was agreed to.

The next amendment was in section 314, on page 30, after line 4, to insert the following paragraph:

(b) To enable the Surgeon General to carry out the purposes of section 301 with respect to developing more effective measures for the prevention, treatment, and control of tuberculosis, and to assist, through grants and as otherwise provided in this section, States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate measures for the prevention, treatment, and control of such disease, including the provision of appropriate facilities for care and treatment and including the training of personnel for State and local health work, and to enable him to prevent and control the spread of tuberculosis in interstate traffic, and to meet the cost of pay, allowances, and traveling expenses of commissioned officers and other personnel of the Service detailed to assist in carrying out the purpose of this section with respect to tuberculosis, and to administer this section with respect to such disease, there is hereby authorized to be appropriated for the fiscal year ending June 30, 1945, the sum of \$10,000,000, and for each fiscal year thereafter a sum sufficient to carry out the purposes of this subsection.

The amendment was agreed to.

The next amendment was, on the same page, in line 25, to change the paragraph designation from "(b)" to "(c)."

The amendment was agreed to.

The next amendment was, on page 31, line 16, to change the paragraph designation from "(c)" to "(d)"; in line 18, after "subsection (a)", to strike out the word "and"; in line 19, after "subsection (b)", to insert "and, within the limits specified in subsection (c), the total sum from the appropriation under that subsection"; and on page 32, line 1, after the word "problem", to insert "the size of the tuberculosis problem."

The amendment was agreed to.

The next amendment was, on page 32, line 6, to change the paragraph designation from "(d)" to "(e)."

The amendment was agreed to.

The next amendment was, on the same page, line 18, to change the paragraph designation from "(e)" to "(f)"; and in line 20, after the word "subsection", to strike out "(a)" and insert "(a)," and in the same line, after "(b)", to insert "or subsection (c)."

The amendment was agreed to.

The next amendment was, on the same page, line 24, to change the paragraph designation from "(f)" to "(g)."

The amendment was agreed to.

The next amendment was, on page 33, line 3, to change the paragraph designation from "(g)" to "(h)"; in line 6, after the word "subsection", to strike out "(a)" and insert "(a),"; in line 7, after "subsection (b)", to insert "or subsection (c)"; and in line 10, after the word "subsection", to strike out "(e)" and insert "(f)."

The amendment was agreed to.

The next amendment was, on page 33, in line 22, to change the paragraph designation from (h) to (i).

The amendment was agreed to.

The next amendment was, on page 34, in line 4, to change the paragraph designation from (i) to (j); in the same line, after "subsection (a)", to strike out "of this section" and insert "and funds appropriated under subsection (b)"; in line 8, after the word "out", to strike out "such subsection" and insert "the respective subsections", and in line 12, after the word "by", to strike out "such subsection" and insert "the respective subsections."

The amendment was agreed to.

The next amendment was, in section 321, on page 35, after line 4, to insert the following: "and from time to time, with the approval of the President, select suitable sites for and establish such additional institutions, hospitals, and stations in the States and possessions of the United States as in his judgment are necessary to enable the Service to discharge its functions and duties."

The amendment was agreed to.

The next amendment was, in section 326, on page 41, after line 2, to strike out:

Such cost shall be at such uniform rate as may be prescribed in such regulations of the President.

And insert:

Such cost shall be at such uniform rate as may be prescribed from time to time by the President for the hospitalization of dependents of naval and Marine Corps personnel at any naval hospital, pursuant to section 2 of the act of May 10, 1943 (57 Stat. 80).

The amendment was agreed to.

The next amendment was, in section 343, on page 46, line 2, after the word "transfers", to insert:

When sentence is pronounced against any person whom the prosecuting officer believes to be an addict, such officer shall report to the authority vested with the power to designate the place of confinement, the name of such person, the reasons for his belief, all pertinent facts bearing on such addiction, and the nature of the offense committed.

The amendment was agreed to.

The next amendment was, in section 344, on page 49, line 22, to change the paragraph designation from (d) to (c) and on page 50, line 5, to change the paragraph designation from "(c)" to "(d)."

The amendment was agreed to.

The next amendment was, in section 351, on page 53, line 12, after the word "purity", to insert "and", and after the word "potency" to strike out "and efficaciousness."

The amendment was agreed to.

The next amendment was, in the same section, on page 54, line 10, after the paragraph designation "(g)", to strike out "the persons and the products to which this section is applicable shall be subject also to the provisions of the" and to insert "Nothing contained in this act shall be construed as in any way affecting, modifying, repealing, or superseding the provisions of the", and in line 14, after the word "Act", to strike out the comma and the following: "except that section 505 of such act shall not apply in the case of any virus, serum, toxin, antitoxin, or other product propagated, manufactured, or prepared pursuant to an unsuspended and unrevoked license issued under this section" and insert "(U. S. C., 1940 ed., title 21, ch. 9)."

The amendment was agreed to.

The next amendment was, in section 366, on page 59, line 19, after "(a)", to strike out "Any" and insert "Except as otherwise prescribed in regulations, any."

The amendment was agreed to.

The next amendment was, in the same section, on page 61, line 13, after the word "treaty", to strike out "or may be designated by regulation; nor, to the extent prescribed by regulations, to such of the other vessels referred to in subsection (a) hereof as may be designated in such regulations."

The amendment was agreed to.

The next amendment was, in the same section, on page 62, line 1, after the word "vessel", to insert:

The certificate required by this subsection shall be procurable from the quarantine officer, upon arrival of the vessel at the quarantine station and satisfactory inspection thereof, at any time within which quarantine services are performed at such station.

The amendment was agreed to.

The next amendment was, in section 367, on page 62, line 8, after the words "application to", to strike out "civil", and in line 9, before the word "aircraft", to strike out "civil."

The amendment was agreed to.

The next amendment was, in section 368, page 62, line 24, after the word "section", to strike out "364 or section"; in line 25, after the word "regulations", to



strike out "thereunder," and insert "thereunder"; on page 63, after the word "section", to strike out "367" and insert "364."

The amendment was agreed to.

The next amendment was, on page 64, line 1, to insert the following:

**PART H—TRAINING**  
**TRAINING OF NURSES**

SEC. 371. The Surgeon General is authorized to provide for training and instruction of persons in nursing and related subjects, in educational and other training institutions which have been approved by the Surgeon General as meeting standards prescribed by regulations of the President; payment for such training and instruction, and for tuition, fees and subsistence, to be made through certification from time to time by the Surgeon General, in accordance with regulations of the President, to the Secretary of the Treasury of the name of the approved institution and the amount to be paid; and the Secretary shall make payment in accordance with such certification prior to audit or settlement by the General Accounting Office.

Mr. THOMAS of Utah. Mr. President, I ask that the amendment on page 64 be rejected.

The PRESIDING OFFICER. The question is on agreeing to the amendment beginning on page 64, line 1.

The amendment was rejected.

The PRESIDING OFFICER. The question is on agreeing to the amendment beginning on page 64, line 1.

The next amendment was in section 406, on page 69, line 9, after the word "limiting" to strike out "(1)" and insert "(a)", and in line 13, after the word "or" to strike "(2)" and insert "(b)."

The amendment was agreed to.

The next amendment was in section 501, page 71, after line 24 to insert the following:

(e) Donations of \$50,000 or over in aid of research may be acknowledged by the establishment within the National Institute of Health of suitable memorials to the donors.

The amendment was agreed to.

The next amendment was, in section 610, on page 82, after line 11 to strike out the following:

(b) Subject to regulations of the President, lightkeepers and assistant lightkeepers (who during their active service were entitled to medical relief at hospitals and other stations of the Public Health Service), and officers and crews of vessels of the former Lighthouse Service, who have been or who may hereafter be retired under the provisions of section 6 of the Act of June 20, 1918, as amended (U. S. C., 1940 edition, title 33, sec. 763), shall be entitled to medical, surgical, and dental treatment and hospitalization by the Public Health Service.

And to insert:

(b) Subject to regulations of the President, lightkeepers, assistant lightkeepers, and officers and crews of vessels of the former Lighthouse Service, including any such persons who subsequent to June 30, 1939, have involuntarily been assigned to other civilian duty in the Coast Guard, who were entitled to medical relief at hospitals and other stations of the Public Health Service prior to enactment of this act, and who are now or hereafter on active duty or who have been or may hereafter be retired under the provisions of section 6 of the act of June 20, 1918, as amended (U. S. C., 1940 ed., title 33, sec. 763), shall be entitled to medical,

surgical, and dental treatment and hospitalization at hospitals and other stations of the Public Health Service: *Provided*, That such persons while on active duty shall also be entitled to care and treatment in accordance with the provisions of section 322 (e) of this act.

(c) For the duration of the present war and for 6 months thereafter, seamen employed on foreign-flag vessels which are owned or operated by citizens of the United States or by corporations incorporated under the law of the United States or of any State shall be entitled to the same benefits as are provided by section 322 (a) (1) for seamen employed on vessels of the United States.

The amendment was agreed to.

The next amendment was in section 611, after line 22, to insert:

The two paragraphs under the subheading "Marine—hospital establishment (customs:)" under the heading "Under the Treasury Department" in section 3689 in title XLI of the Revised Statutes of the United States;

The amendment was agreed to.

The next amendment was on page 84, line 3, to strike out "Section 3689 in title XLI, and sections" and insert "Sections."

The amendment was agreed to.

The next amendment was, on page 94, line 25, after the words "public health", to strike out "wherever they appear."

The amendment was agreed to.

The next amendment was, on page 95, at the beginning of line 1, to strike out "the second sentence of."

The amendment was agreed to.

The next amendment was, on page 95, line 16, after the numerals "228", to insert "chapter 725, 49 Statutes at Large 1827, at page 1839."

The amendment was agreed to.

The next amendment was, on page 97, line 8, after the numerals "547", to insert "at page 548."

The amendment was agreed to.

The next amendment was, on page 98, line 7, after the word "Congress", to strike out the comma and the words "at page 4."

The amendment was agreed to.

The PRESIDING OFFICER. That completes the committee amendments.

The bill is before the Senate and open to further amendment. If there be no further amendment to be proposed, the question is on the engrossment of the amendments and the third reading of the bill.

The amendments were ordered to be engrossed, and the bill to be read a third time.

The bill (H. R. 4624) was read the third time, and passed.

**ORDER OF BUSINESS**

Mr. BARKLEY. Mr. President, the acting chairman of the Committee on Appropriations advises me that he hopes to have several conference reports ready within a short time. The conferees are at work, and it is desirable to try to dispose of the measures today. I, therefore, ask unanimous consent that the Senate stand in recess, subject to the call of the Chair. I anticipate that the call will probably come around 6 o'clock.

Mr. CONNALLY. Mr. President, there is on the Executive Calendar a convention on the Inter-American Institute of

Agricultural Sciences, which I should like to have disposed of at this time.

Mr. BARKLEY. Then we might as well have an executive session.

Mr. CONNALLY. Very well.

**EXECUTIVE SESSION**

Mr. BARKLEY. I move that the Senate proceed to consider executive business.

The motion was agreed to; and the Senate proceeded to the consideration of executive business.

**EXECUTIVE MESSAGES REFERRED**

The PRESIDING OFFICER (Mr. HILL in the chair) laid before the Senate messages from the President of the United States, which were referred to the appropriate committees.

(For nominations this day received, see the end of Senate proceedings.)

**EXECUTIVE REPORTS OF COMMITTEES**

The following favorable reports of nominations were submitted:

By Mr. WALSH of Massachusetts, from the Committee on Naval Affairs:

Brig. Gen. Clifton B. Cates to be a major general in the Marine Corps for temporary service from the 1st day of February, 1944.

By Mr. McKELLAR, from the Committee on Post Offices and Post Roads:

Sundry postmasters.

**CONVENTION ON THE INTER-AMERICAN INSTITUTE OF AGRICULTURAL SCIENCES**

Mr. CONNALLY. Mr. President, the first item on the Executive Calendar is the convention on the Inter-American Institute of Agricultural Sciences. The convention has been favorably reported by the Committee on Foreign Relations, and I should like very much to have it ratified at this time.

The Senate, as in Committee of the Whole, proceeded to consider the convention, Executive B (78th Cong., 2d sess.), a convention on the Inter-American Institute of Agricultural Sciences, opened for signature in the Spanish, English, Portuguese, and French languages at the Pan American Union in Washington on January 15, 1944. Signed by the United States of America on January 15, 1944, which was read the second time, as follows:

**CONVENTION ON THE INTER-AMERICAN INSTITUTE OF AGRICULTURAL SCIENCES**

The Governments of the American Republics, desiring to promote the advancement of the agricultural sciences and related arts and sciences; and wishing to give practical effect to the resolution approved by the Eighth American Scientific Congress held in Washington in 1940, recommending the establishment of an Inter-American Institute of Tropical Agriculture, have agreed to conclude a Convention in order to recognize the permanent status of the Inter-American Institute of Agricultural Sciences, hereinafter referred to as "the Institute," on the basis of the following Articles:

**ARTICLE I**

The Contracting States hereby recognize the permanent status of the Inter-American Institute of Agricultural Sciences, incorporated under the laws of the District of Columbia, United States of America, on June 18, 1942; and they agree to recognize the Institute as a legal entity in accordance with their own legislation. The Institute shall have all the rights, benefits, assets, lands, and other







[PUBLIC LAW 410—78TH CONGRESS]

[CHAPTER 373—2D SESSION]

[H. R. 4624]

AN ACT

To consolidate and revise the laws relating to the Public Health Service, and for other purposes.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

TITLE I—SHORT TITLE AND DEFINITIONS

SHORT TITLE

SECTION 1. Titles I to V, inclusive, of this Act may be cited as the "Public Health Service Act".

DEFINITIONS

SEC. 2. When used in this Act—

- (a) The term "Service" means the Public Health Service;
- (b) The term "Surgeon General" means the Surgeon General of the Public Health Service;
- (c) The term "Administrator" means the Federal Security Administrator;
- (d) The term "regulations", except when otherwise specified, means rules and regulations made by the Surgeon General with the approval of the Administrator;
- (e) The term "executive department" means any executive department, agency, or independent establishment of the United States or any corporation wholly owned by the United States;
- (f) The term "State" means a State or the District of Columbia, Hawaii, Alaska, Puerto Rico, or the Virgin Islands, except that as used in section 361 (d) such term means a State, the District of Columbia, or Alaska;
- (g) The term "possession" includes, among other possessions, Puerto Rico and the Virgin Islands;
- (h) The term "seamen" includes any person employed on board in the care, preservation, or navigation of any vessel, or in the service, on board, of those engaged in such care, preservation, or navigation;
- (i) The term "vessel" includes every description of watercraft or other artificial contrivance used, or capable of being used, as a means of transportation on water, exclusive of aircraft and amphibious contrivances;
- (j) The term "habit-forming narcotic drug" or "narcotic" means opium and coca leaves and the several alkaloids derived therefrom, the best known of these alkaloids being morphia, heroin, and codeine, obtained from opium, and cocaine derived from the coca plant; all compounds, salts, preparations, or other derivatives obtained either from the raw material or from the various alkaloids; Indian hemp

and its various derivatives, compounds, and preparations, and peyote in its various forms; and

(k) The term "addict" means any person who habitually uses any habit-forming narcotic drugs so as to endanger the public morals, health, safety, or welfare, or who is or has been so far addicted to the use of such habit-forming narcotic drugs as to have lost the power of self-control with reference to his addiction.

## TITLE II—ADMINISTRATION

### PUBLIC HEALTH SERVICE

Sec. 201. The Public Health Service in the Federal Security Agency shall be administered by the Surgeon General under the supervision and direction of the Administrator.

### ORGANIZATION

SEC. 202. The Service shall consist of (1) the Office of the Surgeon General, (2) the National Institute of Health, (3) the Bureau of Medical Services, and (4) the Bureau of State Services. The Surgeon General is authorized and directed to assign to the Office of the Surgeon General, to the National Institute of Health, to the Bureau of Medical Services, and to the Bureau of State Services, respectively, the several functions of the Service, and to establish within them such divisions, sections, and other units as he may find necessary; and from time to time abolish, transfer, and consolidate divisions, sections, and other units and assign their functions and personnel in such manner as he may find necessary for efficient operation of the Service. No division shall be established, abolished, or transferred, and no divisions shall be consolidated, except with the approval of the Administrator. The National Institute of Health shall be administered as a part of the field service. The Surgeon General may delegate to any officer or employee of the Service such of his powers and duties under this Act, except the making of regulations, as he may deem necessary or expedient.

### COMMISSIONED CORPS

SEC. 203. There shall be in the Service a commissioned Regular Corps and, for the purpose of securing a reserve for duty in the Service in time of national emergency, a Reserve Corps. All commissioned officers shall be citizens and shall be appointed without regard to the civil-service laws and compensated without regard to the Classification Act of 1923, as amended. Commissioned officers of the Reserve Corps shall be appointed by the President and commissioned officers of the Regular Corps shall be appointed by him by and with the advice and consent of the Senate. Commissioned officers of the Reserve Corps shall at all times be subject to call to active duty by the Surgeon General, including active duty for the purpose of training and active duty for the purpose of determining their fitness for appointment in the Regular Corps. All active service in the Reserve Corps, as well as service in the Regular Corps, shall be credited for the purpose of promotion in the Regular Corps.



## SURGEON GENERAL

SEC. 204. The Surgeon General shall be appointed from the Regular Corps for a four-year term by the President by and with the advice and consent of the Senate. Upon the expiration of such term the Surgeon General, unless reappointed, shall revert to the grade and number in the Regular Corps that he would have occupied had he not served as Surgeon General.

## DEPUTY SURGEON GENERAL AND ASSISTANT SURGEONS GENERAL

SEC. 205. (a) The Surgeon General shall assign one commissioned officer from the Regular Corps to administer the Office of the Surgeon General, to act as Surgeon General during the absence or disability of the Surgeon General or in the event of a vacancy in that office, and to perform such other duties as the Surgeon General may prescribe, and while so assigned he shall have the title of Deputy Surgeon General.

(b) The Surgeon General shall assign six commissioned officers from the Regular Corps to be, respectively, the Director of the National Institute of Health, the Chief of the Bureau of State Services, the Chief of the Bureau of Medical Services, the Chief Medical Officer of the United States Coast Guard, the Chief Dental Officer of the Service, and the Chief Sanitary Engineering Officer of the Service, and while so serving they shall each have the title of Assistant Surgeon General.

(c) The Surgeon General shall designate the Assistant Surgeon General who shall serve as Surgeon General in case of absence or disability, or vacancy in the offices, of both the Surgeon General and the Deputy Surgeon General.

## GRADES, RANKS, AND TITLES OF THE COMMISSIONED CORPS

SEC. 206. (a) The Surgeon General, during the period of his appointment as such, shall be of the same grade, with the same pay and allowances, as the Surgeon General of the Army; and the Deputy Surgeon General and Assistant Surgeons General, while assigned as such, shall have the grade corresponding with the grade of Brigadier General, with the same pay and allowances. The grades of commissioned officers of the Service shall correspond with grades of officers of the Army as follows:

- (1) Officers of the director grade—colonel;
- (2) Officers of the senior grade—lieutenant colonel;
- (3) Officers of the full grade—major;
- (4) Officers of the senior assistant grade—captain;
- (5) Officers of the assistant grade—first lieutenant; and
- (6) Officers of the junior assistant grade—second lieutenant.

(b) The titles of medical officers of the foregoing grades shall be respectively (1) medical director, (2) senior surgeon, (3) surgeon, (4) senior assistant surgeon, (5) assistant surgeon, and (6) junior assistant surgeon. The President is authorized to prescribe titles, appropriate to the several grades, for commissioned officers of the Service other than medical officers. All titles of the officers of the Reserve Corps shall have the suffix "Reserve".

## SPECIAL TEMPORARY POSITIONS

SEC. 207. (a) When necessary for the accomplishment of important temporary work in time of war, or of emergency proclaimed by him, the President may establish special temporary positions in the Service and prescribe grades which shall be applicable to officers during periods they are assigned to such positions. While assigned to any such position an officer shall receive the pay and allowances applicable to the grade so prescribed. Not more than three such positions existing at any one time shall have the grade of Assistant Surgeon General. The Surgeon General shall assign commissioned officers to such positions.

(b) Commissioned officers and qualified technical or professional noncommissioned personnel may be assigned by the Surgeon General to be chiefs of administrative units. Such assignments shall not affect the pay of commissioned officers so assigned, except that when any commissioned officer below the grade of director is assigned to serve as chief of a division such officer during the period so assigned shall have the temporary grade and receive the pay and allowances applicable to the director grade.

## APPOINTMENT OF PERSONNEL

SEC. 208. (a) (1) Except as provided in subsection (b) of this section, original appointments to the Regular Corps may be made only in the junior assistant, assistant, and senior assistant grades and original appointments to a grade above junior assistant shall be made only after passage of an examination, given in accordance with regulations of the President, in one or more of the several branches of medicine, surgery, dentistry, hygiene, sanitary engineering, pharmacy, nursing, or related scientific specialties in the field of public health.

(2) Original appointments to the Reserve Corps may be made to any grade up to and including the director grade but only after passage of an examination given in accordance with regulations of the President. Reserve commissions shall be for a period of not more than five years and any such commission may be terminated by the President at any time, in his discretion.

(b) Whenever commissioned officers of the Service are not available for the performance of permanent duties requiring highly specialized training and experience in special fields related to public health, the Administrator on recommendation of the Surgeon General shall report that fact to the President and the President is authorized to appoint, by and with the advice and consent of the Senate, not to exceed three persons in any one fiscal year to grades in the Regular Corps of the Service above that of senior assistant, but not to a grade above that of director; and for purposes of pay and pay period any person appointed under the provisions of this section shall be considered as having had on the date of appointment service equal to that of the junior officer of the grade to which appointed.

(c) In accordance with regulations, special consultants may be employed to assist and advise in the operations of the Service. Such consultants may be appointed without regard to the civil-service

laws and their compensation may be fixed without regard to the Classification Act of 1923, as amended.

(d) In accordance with regulations, individual scientists, other than commissioned officers of the Service, may be designated by the Surgeon General to receive fellowships, appointed for duty with the Service without regard to the civil-service laws and compensated without regard to the Classification Act of 1923, as amended, may hold their fellowships under conditions prescribed therein, and may be assigned for studies or investigations either in this country or abroad during the terms of their fellowships.

(e) Persons who are not citizens may be employed as consultants pursuant to subsection (c) and may be appointed to fellowships pursuant to subsection (d). Unless otherwise specifically provided, any prohibition in any other Act against the employment of aliens, or against the payment of compensation to them, shall not be applicable in the case of persons employed or appointed pursuant to such subsections.

(f) The appointment of any officer or employee of the Service made in accordance with the civil-service laws shall be made by the Administrator, and may be made effective as of the date on which such officer or employee enters upon duty.

#### PAY AND ALLOWANCES

SEC. 209. (a) Commissioned officers of the Regular Corps shall receive such pay and allowances as are or may hereafter be provided by law.

(b) Reserve officers shall receive the same pay and allowances when on active duty as commissioned officers of the Regular Corps, including allowances for travel and transportation of household goods and effects.

(c) In accordance with regulations of the President, commissioned officers of the Regular Corps and officers of the Reserve on active duty may make allotments from their pay and may be granted leaves of absence without any deduction from their pay. Such officers shall also be permitted to purchase quartermaster supplies from the Army, Navy, and Marine Corps at the same price as is charged officers of the Army, Navy, and Marine Corps.

(d) Female commissioned officers of the Service shall receive the same pay and allowances as male officers of corresponding grades, including allowances for dependents, except that no allowance shall be paid to any female commissioned officer on account of any dependent who is not in fact dependent upon such officer for his or her chief support. For the purposes of this subsection the term "dependent" shall include a husband, father, mother, and unmarried children (including stepchildren and adopted children) under twenty-one years of age.

(e) Members of the National Advisory Health Council and members of the National Advisory Cancer Council, other than ex officio members, while attending conferences or meetings of their respective Councils or while otherwise serving at the request of the Surgeon General, shall be entitled to receive compensation at a rate to be fixed by the Administrator, but not exceeding \$25 per diem, and



shall also be entitled to receive an allowance for actual and necessary traveling and subsistence expenses while so serving away from their places of residence.

(f) Field employees of the Service, except those employed on a per diem or fee basis, who render part-time duty and are also subject to call at any time for services not contemplated in their regular part-time employment, may be paid annual compensation for such part-time duty and, in addition, such fees for such other services as the Surgeon General may determine; but in no case shall the total paid to any such employee for any fiscal year exceed the amount of the minimum annual salary rate of the classification grade of the employee.

(g) Whenever any commissioned or other officer or employee of the Service is assigned for duty which the Surgeon General finds requires intimate contact with persons afflicted with leprosy, he may receive, as provided by regulations of the President, in addition to the pay and any allowances of his grade, not more than one-half the pay of such grade, and such allowances or increased allowances as may be provided for by such regulations.

(h) Individuals appointed under section 208 (d) shall have included in their fellowships such stipends or allowances, including travel and subsistence expenses, as the Surgeon General may deem necessary to procure qualified fellows.

#### PROMOTIONS AND SEPARATION OF COMMISSIONED OFFICERS IN THE REGULAR CORPS

SEC. 210. (a) Promotions of commissioned officers of the Regular Corps to any grade up to and including the director grade shall be made only after examination given in accordance with regulations of the President and shall be made according to the same length of service as is now or may hereafter be prescribed for promotion of officers of corresponding grades of the Medical Corps of the Army, except that—

(1) In time of war, or of national emergency proclaimed by the President, any commissioned officer of the Regular Corps may be appointed to a higher temporary grade with the pay and allowances thereof without examination and without vacating his permanent appointment, and, if his service shall have been continuous, without renewing his oath of office;

(2) For purposes of promotion, an officer whose original appointment to the Regular Corps was above the assistant grade shall be considered as having had on the date of such original appointment service equal to that of the junior officer of the grade to which he was appointed, except that if his active commissioned service in the Service exceeds that of the junior officer of the grade, such service (not exceeding ten years for an officer appointed in the senior assistant grade and fourteen years for an officer appointed in the full grade) shall be credited for purposes of promotion;

(3) Officers commissioned in the grade of junior assistant shall be examined for promotion in accordance with regulations of the President and if qualified shall be promoted to the next higher grade; and

(4) Commissioned officers other than medical, dental, sanitary engineering, and pharmacist officers shall be promoted in accordance with regulations of the President.

(b) At the end of his first three years of service, the record of each commissioned officer in the Regular Corps originally appointed in or above the grade of senior assistant shall be reviewed in accordance with regulations of the President and if found not fully qualified for further service he shall be separated from the Service and paid six months' pay and allowances.

(c) When a commissioned officer in the Regular Corps is found, after examination, to be not qualified for promotion for reasons other than physical disability incurred in line of duty—

(1) If below the full grade he shall be separated from the Service, and if in the assistant grade he shall be separated and paid six months' pay and allowances, and if in the senior assistant grade he shall be separated and paid one year's pay and allowances; and

(2) If in the full or senior grade he shall be reported as not in line of promotion, or shall be retired and paid at the rate of  $2\frac{1}{2}$  per centum for each complete year of active commissioned service in the Service, but in no case to exceed 60 per centum of his active pay at the time he is retired.

#### RETIREMENT OF COMMISSIONED OFFICERS

SEC. 211. (a) A commissioned officer of the Regular Corps retired for disability from disease or injury incurred in line of duty, or a commissioned officer of the Reserve Corps retired for disability from disease or injury incurred in line of duty in time of war, shall be entitled, except as provided in subsection (c), to receive retired pay at the rate of 75 per centum of his active pay at the time of retirement.

(b) A commissioned officer shall be retired on the first day of the month following his sixty-fourth birthday. If he is an officer in the Regular Corps, he shall, except as provided in subsection (c), be entitled to receive retired pay at the rate of 75 per centum of his active pay at the time of retirement.

(c) (1) Any commissioned officer of the Regular Corps who at the time of his original appointment was more than forty-five years of age shall upon retirement, unless retired for disability from disease or injury incurred in time of war, be entitled to retired pay only at the rate of 4 per centum of his active pay at the time of retirement for each twelve months of active commissioned service, including any such service in the Army, Navy, or Coast Guard, but in no case more than 75 per centum of such active pay.

(2) The retired pay of any commissioned officer who has served four years or more as Surgeon General or Deputy Surgeon General shall be based on the pay of the highest grade held by him as such Surgeon General or Deputy Surgeon General.

(3) The retired pay of an officer of the Regular Corps who has failed, by reason of disability incurred in line of duty, to receive a promotion to which he would otherwise have been entitled, shall be based on the pay of the grade to which, but for such disability, he would have been promoted.

(d) An officer retired for disability who is found to have recovered from his disability, and in time of war an officer who has been retired for age, may in accordance with regulations of the President be recalled to active duty.

(e) With the approval of the President a commissioned officer who has served four years or more as Surgeon General and who has had not less than twenty-five years of active commissioned service in the Service may retire voluntarily, either at the termination of his term as Surgeon General or at any time thereafter; and his retired pay shall be at the rate of 75 per centum of the pay of the highest grade held by him as such Surgeon General.

(f) Commissioned officers of the Reserve Corps, while on active duty, shall be deemed to be officers of the executive branch of the Government within the meaning of section 3 of the Civil Service Retirement Act, as amended (U. S. C., 1940 edition, title 5, section 693).

#### MILITARY BENEFITS

SEC. 212. (a) For the purposes of this section—

(1) the term “full military benefits” means all rights, privileges, immunities, and benefits provided under any law of the United States in the case of commissioned officers of the Army (including their surviving beneficiaries) on account of active military service, including, but not limited to, burial payments in the event of death, six months’ pay in case of death, veterans’ compensation and pensions and other veterans’ benefits, the rights provided under the Soldiers’ and Sailors’ Civil Relief Act, as amended, and under the National Service Life Insurance Act, as amended, travel allowances, including per diem allowances for travel without regard to repeated travel between two or more places in the same vicinity, exemption from payment of postage on mail, exemption of certain pay from Federal income taxation, and other benefits, privileges and exceptions under the Internal Revenue laws; excluding, however, retired pay, uniform allowances, the right to be awarded military ribbons, medals, and decorations, and the benefits of the Mustering-out Payment Act of 1944, and excluding reemployment rights with respect to any commissioned officer of the Service except officers of the Reserve Corps called to active duty after November 11, 1943; and

(2) the term “limited military benefits” means full military benefits, except veterans’ compensation and pensions and other veterans’ benefits, and eligibility under the National Service Life Insurance Act, as amended.

(b) Commissioned officers of the Service (including their surviving beneficiaries)—

(1) shall be entitled to limited military benefits with respect to all active service in time of war;

(2) shall be entitled to full military benefits with respect to active service performed while detailed for duty with the Army, Navy, or Coast Guard;

(3) shall be entitled to full military benefits with respect to active service outside the continental limits of the United States, or in Alaska, in time of war;



(4) shall be entitled to full military benefits with respect to active service performed while the Service is part of the military forces of the United States pursuant to executive order of the President.

(c) The authority vested by law in the War Department, the Secretary of War, or other officers of the War Department with respect to rights, privileges, immunities, and benefits referred to in subsection (a) shall be exercised, with respect to commissioned officers of the Service, by the Surgeon General under the supervision and direction of the Administrator.

(d) The President may prescribe the conditions under which commissioned officers of the Service may be awarded military ribbons, medals, and decorations.

#### ALLOWANCES FOR UNIFORMS

SEC. 213. An allowance of \$250 for uniforms and equipment is authorized to be paid to each commissioned officer of the Service who is hereafter, in time of war, appointed to the Regular Corps or called to active duty in the Reserve Corps, or who is hereafter on active duty in either corps at the commencement of any war, if at such time the officer is in the grade of junior assistant, assistant, or senior assistant, and is receiving the pay of the first, second, or third pay period; except that no officer who has received such an allowance from the Service shall at any time thereafter be entitled to any further allowance.

#### DETAIL OF PERSONNEL

SEC. 214. (a) The Administrator is authorized, upon the request of the head of an executive department, to detail officers or employees of the Service to such department for duty as agreed upon by the Administrator and the head of such department in order to cooperate in, or conduct work related to, the functions of such department or of the Service. When officers or employees are so detailed their salaries and allowances may be paid from working funds established as provided by law or may be paid by the Service from applicable appropriations and reimbursement may be made as agreed upon by the Administrator and the head of the executive department concerned. Officers detailed for duty with the Army, Navy, or Coast Guard shall be subject to the laws for the government of the service to which detailed.

(b) Upon the request of any State health authority, personnel of the Service may be detailed by the Surgeon General for the purpose of assisting such State or a political subdivision thereof in work related to the functions of the Service.

(c) The Surgeon General may detail personnel of the Service to nonprofit educational, research, or other institutions engaged in health activities for special studies of scientific problems and for the dissemination of information relating to public health.

(d) Personnel detailed under subsections (b) and (c) shall be paid from applicable appropriations of the Service, except that, in accordance with regulations such personnel may be placed on leave without pay and paid by the State, subdivision, or institution to which they are detailed. The services of personnel while detailed

pursuant to this section shall be considered as having been performed in the Service for purposes of longevity pay, promotion, retirement, compensation for injury or death, and the benefits provided by section 212.

#### REGULATIONS

SEC. 215. (a) The President shall from time to time prescribe regulations with respect to the appointment, promotion, retirement, termination of commission, titles, pay, uniforms, allowances (including increased allowances for foreign service), and discipline of the commissioned corps of the Service.

(b) The Surgeon General, with the approval of the Administrator, unless specifically otherwise provided, shall promulgate all other regulations necessary to the administration of the Service, including regulations with respect to travel, transportation of household goods and effects, and uniforms for employees, and regulations with respect to the custody, use, and preservation of the records, papers, and property of the Service.

(c) No regulation relating to qualifications for appointment of medical officers or employees shall give preference to any school of medicine.

#### USE OF SERVICE IN EMERGENCY

SEC. 216. In time of war, or of emergency proclaimed by the President, he may utilize the Service to such extent and in such manner as shall in his judgment promote the public interest, and in time of war he may by Executive order declare the commissioned corps of the Service to be a military service. Upon such declaration, and during the period of such war or such part thereof as the President shall prescribe, the commissioned corps (1) shall constitute a branch of the land and naval forces of the United States, and (2) to the extent prescribed by regulations of the President, shall be subject to the Articles of War and to the Articles for the Government of the Navy: *Provided*, That during such period or part thereof the commissioned corps shall continue to operate as part of the Service except to the extent that the President may direct as Commander in Chief.

#### NATIONAL ADVISORY HEALTH AND CANCER COUNCILS

SEC. 217. (a) The National Advisory Health Council shall consist of fourteen members. The Director of the National Institute of Health, and three experts, one each from the Army, the Navy, and the Bureau of Animal Industry, to be detailed by the Secretary of War, the Secretary of the Navy, and the Secretary of Agriculture, respectively, shall be ex officio members of the Council. The Surgeon General, with the approval of the Administrator, shall appoint, without regard to the civil-service laws, ten members of the Council who shall be persons, not otherwise in the employ of the United States, skilled in the sciences related to health. Each appointed member shall hold office for a term of five years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term. An appointed member shall not be eligible to serve continuously for more than five years but shall be

eligible for reappointment if he has not served immediately preceding his reappointment.

(b) The National Advisory Health Council shall advise, consult with, and make recommendations to, the Surgeon General on matters relating to health activities and functions of the Service. The Surgeon General is authorized to utilize the services of any member or members of the Council, and where appropriate, any member or members of the National Advisory Cancer Council in connection with matters related to the work of the Service, for such periods, in addition to conference periods, as he may determine.

(c) The National Advisory Cancer Council shall consist of the Surgeon General ex officio, who shall be Chairman, and of six members to be appointed without regard to the civil-service laws by the Surgeon General with the approval of the Administrator. The six appointed members shall be selected from leading medical or scientific authorities who are outstanding in the study, diagnosis, or treatment of cancer. Each appointed member shall hold office for a term of three years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term. An appointed member shall not be eligible to serve continuously for more than three years but shall be eligible for reappointment if he has not served immediately preceding his reappointment.

### TITLE III—GENERAL POWERS AND DUTIES OF PUBLIC HEALTH SERVICE

#### PART A—RESEARCH AND INVESTIGATIONS

##### IN GENERAL

SEC. 301. The Surgeon General shall conduct in the Service, and encourage, cooperate with, and render assistance to other appropriate public authorities, scientific institutions, and scientists in the conduct of, and promote the coordination of, research, investigations, experiments, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases and impairments of man, including water purification, sewage treatment, and pollution of lakes and streams. In carrying out the foregoing the Surgeon General is authorized to—

(a) Collect and make available through publications and other appropriate means, information as to, and the practical application of, such research and other activities;

(b) Make available research facilities of the Service to appropriate public authorities, and to health officials and scientists engaged in special study;

(c) Establish and maintain research fellowships in the Service with such stipends and allowances, including traveling and subsistence expenses, as he may deem necessary to procure the assistance of the most brilliant and promising research fellows from the United States and abroad;

(d) Make grants in aid to universities, hospitals, laboratories, and other public or private institutions, and to individuals for such research projects as are recommended by the National



Advisory Health Council, or, with respect to cancer, recommended by the National Advisory Cancer Council;

(e) Secure from time to time and for such periods as he deems advisable, the assistance and advice of experts, scholars, and consultants from the United States or abroad;

(f) For purposes of study, admit and treat at institutions, hospitals, and stations of the Service, persons not otherwise eligible for such treatment; and

(g) Adopt, upon recommendation of the National Advisory Health Council, or, with respect to cancer, upon recommendation of the National Advisory Cancer Council, such additional means as he deems necessary or appropriate to carry out the purposes of this section.

#### NARCOTICS

SEC. 302. (a) In carrying out the purposes of section 301 with respect to narcotics, the studies and investigations shall include the use and misuse of narcotic drugs, the quantities of crude opium, coca leaves, and their salts, derivatives, and preparations, together with reserves thereof, necessary to supply the normal and emergency medicinal and scientific requirements of the United States. The results of studies and investigations of the quantities of crude opium, coca leaves, or other narcotic drugs, together with such reserves thereof, as are necessary to supply the normal and emergency medicinal and scientific requirements of the United States, shall be reported not later than the 1st day of September each year to the Secretary of the Treasury, to be used at his discretion in determining the amounts of crude opium and coca leaves to be imported under the Narcotic Drugs Import and Export Act, as amended.

(b) The Surgeon General shall cooperate with States for the purpose of aiding them to solve their narcotic drug problems and shall give authorized representatives of the States the benefit of his experience in the care, treatment, and rehabilitation of narcotic addicts to the end that each State may be encouraged to provide adequate facilities and methods for the care and treatment of its narcotic addicts.

### PART B—FEDERAL-STATE COOPERATION

#### IN GENERAL

SEC. 311. The Surgeon General is authorized to accept from State and local authorities any assistance in the enforcement of quarantine regulations made pursuant to this Act which such authorities may be able and willing to provide. The Surgeon General shall also assist States and their political subdivisions in the prevention and suppression of communicable diseases, shall cooperate with and aid State and local authorities in the enforcement of their quarantine and other health regulations and in carrying out the purposes specified in section 314, and shall advise the several States on matters relating to the preservation and improvement of the public health.

#### HEALTH CONFERENCES

SEC. 312. A conference of the health authorities of the several States shall be called annually by the Surgeon General. Whenever in his

opinion the interests of the public health would be promoted by a conference, the Surgeon General may invite as many of such health authorities to confer as he deems necessary or proper. Upon the application of health authorities of five or more States it shall be the duty of the Surgeon General to call a conference of all State and Territorial health authorities joining in the request. Each State represented at any conference shall be entitled to a single vote.

#### COLLECTION OF VITAL STATISTICS

SEC. 313. To secure uniformity in the registration of mortality, morbidity, and vital statistics the Surgeon General shall prepare and distribute suitable and necessary forms for the collection and compilation of such statistics which shall be published as a part of the health reports published by the Surgeon General.

#### GRANTS AND SERVICES TO STATES

SEC. 314. (a) To enable the Surgeon General to carry out the purposes of section 301 with respect to developing more effective measures for the prevention, treatment, and control of venereal diseases, and to assist, through grants and as otherwise provided in this section, States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate measures for the prevention, treatment, and control of such diseases, including the training of personnel for State and local health work, and to enable him to prevent and control the spread of the venereal diseases in interstate traffic, and to meet the cost of pay, allowances, and traveling expenses of commissioned officers and other personnel of the Service detailed to assist in carrying out the purposes of this section with respect to the venereal diseases, and to administer this section with respect to such diseases, there is hereby authorized to be appropriated for each fiscal year a sum sufficient to carry out the purposes of this subsection.

(b) To enable the Surgeon General to carry out the purposes of section 301 with respect to developing more effective measures for the prevention, treatment, and control of tuberculosis, and to assist, through grants and as otherwise provided in this section, States, counties, health districts, and other political subdivisions of the States in establishing and maintaining adequate measures for the prevention, treatment, and control of such disease, including the provision of appropriate facilities for care and treatment and including the training of personnel for State and local health work, and to enable him to prevent and control the spread of tuberculosis in interstate traffic, and to meet the cost of pay, allowances, and traveling expenses of commissioned officers and other personnel of the Service detailed to assist in carrying out the purposes of this section with respect to tuberculosis, and to administer this section with respect to such disease, there is hereby authorized to be appropriated for the fiscal year ending June 30, 1945, the sum of \$10,000,000, and for each fiscal year thereafter a sum sufficient to carry out the purposes of this subsection.

(c) To enable the Surgeon General to assist, through grants and as otherwise provided in this section, States, counties, health districts, and other political subdivisions of the States in establishing and

maintaining adequate public health services, including grants for demonstrations and for the training of personnel for State and local health work, there is hereby authorized to be appropriated for each fiscal year a sum not to exceed \$20,000,000. Of the sum appropriated for each fiscal year pursuant to this subsection there shall be available an amount, not to exceed \$2,000,000, to enable the Surgeon General to provide demonstrations and to train personnel for State and local health work and to meet the cost of pay, allowances, and traveling expenses of commissioned officers and other personnel of the Service detailed to assist States in carrying out the purposes of this subsection.

(d) For each fiscal year, the Surgeon General, with the approval of the Administrator, shall determine the total sum from the appropriation under subsection (a), the total sum from the appropriation under subsection (b), and, within the limits specified in subsection (c), the total sum from the appropriation under that subsection which shall be available for allotment among the several States. He shall, in accordance with regulations, from time to time make allotments from such sums to the several States on the basis of (1) the population, (2) the size of the venereal-disease problem, the size of the tuberculosis problem, and the size of other special health problems, respectively, and (3) the financial need of the respective States. Upon making such allotments the Surgeon General shall notify the Secretary of the Treasury of the amounts thereof.

(e) The Surgeon General, with the approval of the Administrator, shall from time to time determine the amounts to be paid to each State from the allotments to such State, and shall certify to the Secretary of the Treasury, the amounts so determined, reduced or increased, as the case may be, by the amounts by which he finds that estimates of required expenditures with respect to any prior period were greater or less than the actual expenditures for such period. Upon receipt of such certification, the Secretary of the Treasury shall, through the Division of Disbursement of the Treasury Department and prior to audit or settlement by the General Accounting Office, pay in accordance with such certification.

(f) The moneys so paid to any State shall be expended solely in carrying out the purposes specified in subsection (a), or subsection (b), or subsection (c) of this section, as the case may be, and in accordance with plans presented by the health authority of such State and approved by the Surgeon General.

(g) Money so paid shall be paid upon the condition that there shall be spent in such State for the same general purpose from funds of such State and its political subdivisions an amount determined in accordance with regulations.

(h) Whenever the Surgeon General, after reasonable notice and opportunity for hearing to the health authority of the State, finds that, with respect to money paid to the State out of appropriations under subsection (a), or subsection (b), or subsection (c), as the case may be, there is a failure to comply substantially with either—

- (1) the provisions of this section;
- (2) the plan submitted under subsection (f); or
- (3) the regulations;

the Surgeon General shall notify such State health authority either that further payments will not be made to the State from appro-



priations under such subsection (or in his discretion that further payments will not be made to the State from such appropriations for activities in which there is such failure), until he is satisfied that there will no longer be any such failure. Until he is so satisfied the Surgeon General shall make no further certification for payment to such State from appropriations under such subsection, or shall limit payment to activities in which there is no such failure.

(i) All regulations and amendments thereto with respect to grants to States under this section shall be made after consultation with a conference of the State health authorities. Insofar as practicable, the Surgeon General shall obtain the agreement of the State health authorities prior to the issuance of any such regulations or amendments.

(j) Funds appropriated under subsection (a) and funds appropriated under subsection (b), in addition to being available for payments to States, shall also be available for expenditure by the Surgeon General in otherwise carrying out the respective subsections, including expenditures for printing and binding of the findings of investigations, and for pay and allowances and traveling expenses of personnel of the Service engaged in activities authorized by the respective subsections.

#### HEALTH EDUCATION AND INFORMATION

SEC. 315. From time to time the Surgeon General shall issue information related to public health, in the form of publications or otherwise, for the use of the public, and shall publish weekly reports of health conditions in the United States and other countries and other pertinent health information for the use of persons and institutions engaged in work related to the functions of the Service.

#### PART C—HOSPITALS, MEDICAL EXAMINATIONS, AND MEDICAL CARE

##### HOSPITALS

SEC. 321. The Surgeon General, pursuant to regulations, shall—

(a) Control, manage, and operate all institutions, hospitals, and stations of the Service, and provide for the care, treatment and hospitalization of patients, including the furnishing of prosthetic and orthopedic devices; and from time to time, with the approval of the President, select suitable sites for and establish such additional institutions, hospitals, and stations in the States and possessions of the United States as in his judgment are necessary to enable the Service to discharge its functions and duties;

(b) Provide for the transfer of Public Health Service patients, in the care of attendants where necessary, between hospitals and stations operated by the Service or between such hospitals and stations and other hospitals and stations in which Public Health Service patients may be received, and the payment of expenses of such transfer;

(c) Provide for the disposal of articles produced by patients in the course of their curative treatment, either by allowing the patient to retain such articles or by selling them and depositing the money received therefor to the credit of the appropriation

from which the materials for making the articles were purchased; and

(d) Provide for the disposal of money and effects, in the custody of the hospitals or stations, of deceased patients.

#### CARE AND TREATMENT OF SEAMEN AND CERTAIN OTHER PERSONS

SEC. 322. (a) The following persons shall be entitled, in accordance with regulations, to medical, surgical, and dental treatment and hospitalization without charge at hospitals and other stations of the Service:

(1) Seamen employed on vessels of the United States registered, enrolled, and licensed under the maritime laws thereof, other than canal boats engaged in the coasting trade;

(2) Seamen employed on United States or foreign flag vessels as employees of the United States through the War Shipping Administration;

(3) Seamen, not enlisted or commissioned in the military or naval establishments, who are employed on State school ships or on vessels of the United States Government of more than five tons' burden;

(4) Cadets at State maritime academies or on State training ships;

(5) Seamen on vessels of the Mississippi River Commission and, upon application of their commanding officers, officers and crews of vessels of the Fish and Wildlife Service;

(6) Enrollees in the United States Maritime Service on active duty and members of the Merchant Marine Cadet Corps; and

(7) Employees and noncommissioned officers in the field service of the Public Health Service when injured or taken sick in line of duty.

(b) When suitable accommodations are available, seamen on foreign-flag vessels may be given medical, surgical, and dental treatment and hospitalization on application of the master, owner, or agent of the vessel at hospitals and other stations of the Service at rates fixed by regulations. All expenses connected with such treatment, including burial in the event of death, shall be paid by such master, owner, or agent. No such vessel shall be granted clearance until such expenses are paid or their payment appropriately guaranteed to the Collector of Customs.

(c) Any person when detained in accordance with quarantine laws, or, at the request of the Immigration and Naturalization Service, any person detained by that Service, may be treated and cared for by the Public Health Service.

(d) Persons not entitled to treatment and care at institutions, hospitals, and stations of the Service may, in accordance with regulations of the Surgeon General, be admitted thereto for temporary treatment and care in case of emergency.

(e) Persons entitled to care and treatment under subsection (a) of this section may, in accordance with regulations, receive such care and treatment at the expense of the Service from public or private medical or hospital facilities other than those of the Service, when authorized by the officer in charge of the station at which the application is made.

## CARE AND TREATMENT OF FEDERAL PRISONERS

SEC. 323. The Service shall supervise and furnish medical treatment and other necessary medical, psychiatric, and related technical and scientific services, authorized by the Act of May 13, 1930, as amended (U. S. C., 1940 edition, title 18, secs. 751, 752), in penal and correctional institutions of the United States.

## EXAMINATION AND TREATMENT OF FEDERAL EMPLOYEES

SEC. 324. The Surgeon General is authorized to provide at institutions, hospitals, and stations of the Service medical, surgical, and hospital services and supplies for persons entitled to treatment under the United States Employees' Compensation Act and extensions thereof. The Surgeon General may also provide for making medical examinations of—

(a) employees of the Alaska Railroad and employees of the Federal Government for retirement purposes;

(b) employees in the Federal classified service, and applicants for appointment, as requested by the Civil Service Commission for the purpose of promoting health and efficiency;

(c) seamen for purposes of qualifying for certificates of service; and

(d) employees eligible for benefits under the Longshoremen's and Harbor Workers' Compensation Act, as amended (U. S. C., 1940 edition, title 33, chapter 18), as requested by any deputy commissioner thereunder.

## EXAMINATION OF ALIENS

SEC. 325. The Surgeon General shall provide for making, at places within the United States or in other countries, such physical and mental examinations of aliens as are required by the immigration laws, subject to administrative regulations prescribed by the Attorney General and medical regulations prescribed by the Surgeon General with the approval of the Administrator.

## SERVICES TO COAST GUARD, COAST AND GEODETIC SURVEY, AND PUBLIC HEALTH SERVICE

SEC. 326. (a) Subject to regulations of the President—

(1) commissioned officers, chief warrant officers, warrant officers, cadets, and enlisted personnel of the Regular Coast Guard, including those on shore duty and those on detached duty, whether on active duty or retired; and Regular and temporary members of the United States Coast Guard Reserve when on active duty or when retired for disability;

(2) commissioned officers, ships' officers, and members of the crews of vessels of the United States Coast and Geodetic Survey, including those on shore duty and those on detached duty, whether on active duty or retired; and

(3) commissioned officers of the Regular Corps of the Public Health Service, whether on active duty or retired, and commissioned officers of the Reserve Corps when on active duty or when retired for disability;



shall be entitled to medical, surgical, and dental treatment and hospitalization by the Service. The Surgeon General may detail commissioned officers for duty aboard vessels of the Coast Guard or the Coast and Geodetic Survey.

(b) Subject to regulations of the President, the dependent members of families (as defined in such regulations) of persons specified in subsection (a), other than temporary members of the United States Coast Guard Reserve, shall be furnished medical advice and out-patient treatment by the Service at its hospitals and relief stations, and they shall also be furnished hospitalization at hospitals of the Service, if suitable accommodations are available, at a per diem cost to the officer, enlisted person, or member of a crew concerned. Such cost shall be at such uniform rate as may be prescribed from time to time by the President for the hospitalization of dependents of naval and Marine Corps personnel at any naval hospital, pursuant to section 2 of the Act of May 10, 1943 (57 Stat. 80).

(c) The Service shall provide all services referred to in subsection (a) required by the Coast Guard and shall perform all duties prescribed by statute in connection with the examinations to determine physical or mental condition for purposes of appointment, enlistment, and reenlistment, promotion and retirement, and officers of the Service assigned to duty on Coast Guard vessels may extend aid to the crews of American vessels engaged in deep-sea fishing.

#### INTERDEPARTMENTAL WORK

SEC. 327. Nothing contained in this part shall affect the authority of the Service to furnish any materials, supplies, or equipment, or perform any work or services, requested in accordance with section 7 of the Act of May 21, 1920, as amended (U. S. C., 1940 edition, title 31, sec. 686), or the authority of any other executive department to furnish any materials, supplies, or equipment, or perform any work or services, requested by the Federal Security Agency for the Service in accordance with that section.

#### PART D—LEPERS

##### RECEIPT OF LEPERS

SEC. 331. The Service shall, in accordance with regulations, receive into any hospital of the Service suitable for his accommodation any person afflicted with leprosy who presents himself for care, detention, or treatment, or who may be apprehended under section 332 or 361 of this Act, and any person afflicted with leprosy duly consigned to the care of the Service by the proper health authority of any State, Territory, or the District of Columbia. The Surgeon General is authorized, upon the request of any health authority, to send for any person within the jurisdiction of such authority who is afflicted with leprosy and to convey such person to the appropriate hospital for detention and treatment. When the transportation of any such person is undertaken for the protection of the public health the expense of such removal shall be met from funds available for the maintenance of hospitals of the Service.

## APPREHENSION, DETENTION, TREATMENT, AND RELEASE

SEC. 332. The Surgeon General may provide by regulation for the apprehension, detention, treatment, and release of persons being treated by the Service for leprosy.

## PART E—NARCOTICS ADDICTS

## CARE AND TREATMENT

SEC. 341. The Surgeon General is authorized to provide for the confinement, care, protection, treatment, and discipline of persons addicted to the use of habit-forming narcotic drugs who voluntarily submit themselves for treatment and addicts who have been or are hereafter convicted of offenses against the United States, including persons convicted by general courts martial and consular courts. Such care and treatment shall be provided at hospitals of the Service especially equipped for the accommodation of such patients and shall be designed to rehabilitate such persons, to restore them to health, and, where necessary, to train them to be self-supporting and self-reliant.

## EMPLOYMENT OF ADDICTS

SEC. 342. Narcotic addicts in hospitals of the Service designated for their care shall be employed in such manner and under such conditions as the Surgeon General may direct. In such hospitals the Surgeon General may, in his discretion, establish industries, plants, factories, or shops for the production and manufacture of articles, commodities, and supplies for the United States Government. The Secretary of the Treasury may require any Government department, establishment, or other institution, for whom appropriations are made directly or indirectly by the Congress of the United States, to purchase at current market prices, as determined by him or his authorized representative, such of the articles, commodities, or supplies so produced or manufactured as meet their specifications; and the Surgeon General shall provide for payment to the inmates or their dependents of such pecuniary earnings as he may deem proper. The Administrator shall establish a working-capital fund for such industries, plants, factories, and shops out of any funds appropriated for Public Health Service hospitals at which addicts are treated and cared for; and such fund shall be available for the purchase, repair, or replacement of machinery or equipment, for the purchase of raw materials and supplies, for the purchase of uniforms and other distinctive wearing apparel of employees in the performance of their official duties, and for the employment of necessary civilian officers and employees. The Surgeon General may provide for the disposal of products of the industrial activities conducted pursuant to this section, and the proceeds of any sales thereof shall be covered into the Treasury of the United States to the credit of the working-capital fund.

## CONVICTS

SEC. 343. (a) The authority vested with the power to designate the place of confinement of a prisoner shall transfer to hospitals of the Service especially equipped for the accommodation of ad-

dicts, if accommodations are available, all addicts who have been or are hereafter sentenced to confinement, or who are now or shall hereafter be confined, in any penal, correctional, disciplinary, or reformatory institution of the United States, including those addicts convicted of offenses against the United States who are confined in State and Territorial prisons, penitentiaries, and reformatories, except that no addict shall be transferred to a hospital of the Service who, in the opinion of the officer authorized to direct the transfer, is not a proper subject for confinement in such an institution either because of the nature of the crime he has committed or because of his apparent incorrigibility. The authority vested with the power to designate the place of confinement of a prisoner shall transfer from a hospital of the Service to the institution from which he was received, or to such other institution as may be designated by the proper authority, any addict whose presence at a hospital of the Service is detrimental to the well-being of the hospital or who does not continue to be a narcotic addict. All transfers of such prisoners to or from a hospital of the Service shall be accompanied by necessary attendants as directed by the officer in charge of such hospital and the actual and necessary expenses incident to such transfers shall be paid from the appropriation for the maintenance of such Service hospital except to the extent that other Federal agencies are authorized or required by law to pay expenses incident to such transfers. When sentence is pronounced against any person whom the prosecuting officer believes to be an addict, such officer shall report to the authority vested with the power to designate the place of confinement, the name of such person, the reasons for his belief, all pertinent facts bearing on such addiction, and the nature of the offense committed. Whenever an alien addict transferred to a Service hospital pursuant to this subsection is entitled to his discharge but is subject to deportation, in lieu of being returned to the penal institution from which he came he shall be deported by the authority vested by law with power over deportation.

(b) The provisions of the Act of June 21, 1902, as amended (U. S. C., 1940 edition, title 18, secs. 710-712a), regulating commutation of sentence for good conduct of United States prisoners, section 8 of the Act of May 27, 1930 (U. S. C., 1940 edition, title 18, sec. 744h), regulating commutation of sentence for employment in industry, and the Act of June 25, 1910, as amended (U. S. C., 1940 edition, title 18, secs. 714-723c), relating to parole, shall be applicable to any narcotic addict confined in any institution in execution of a judgment or sentence upon conviction of an offense against the United States; except that no narcotic addict confined in any institution, whether or not an institution of the Public Health Service, shall be released by reason of commutation of sentence or parole until the Surgeon General shall have certified that such individual is no longer an addict.

(c) Not later than one month prior to the expiration of the sentence of any addict confined in a Service hospital, he shall be examined by the Surgeon General or his authorized representative. If the Surgeon General believes the person to be discharged is still an addict and that he may by further treatment in a Service hospital be cured of his addiction, the addict shall be informed, in accordance



with regulations, of the advisability of his submitting himself to further treatment. The addict may then apply in writing to the Surgeon General for further treatment in a Service hospital for a period not exceeding the maximum length of time considered necessary by the Surgeon General. Upon approval of the application by the Surgeon General or his authorized agent, the addict may be given such further treatment as is necessary to cure him of his addiction.

(d) Every person convicted of an offense against the United States, upon discharge, or upon release on parole, from a hospital of the Service, shall be furnished with the gratuities and transportation authorized by law to be furnished to prisoners upon release from a penal, correctional, disciplinary, or reformatory institution.

(e) Any court of the United States having the power to suspend the imposition or execution of sentence and to place a defendant on probation under any existing laws may impose as one of the conditions of such probation that the defendant, if an addict, shall submit himself for treatment at a hospital of the Service especially equipped for the accommodation of addicts until discharged therefrom as cured and that he shall be admitted thereto for such purpose. Upon the discharge of any such probationer from a hospital of the Service, he shall be furnished with the gratuities and transportation authorized by law to be furnished to prisoners upon release from a penal, correctional, disciplinary, or reformatory institution. The actual and necessary expense incident to transporting such probationer to such hospital and to furnishing such transportation and gratuities shall be paid from the appropriation for the maintenance of such hospital except to the extent that other Federal agencies are authorized or required by law to pay the cost of such transportation: *Provided*, That where existing law vests a discretion in any officer as to the place to which transportation shall be furnished or as to the amount of clothing and gratuities to be furnished, such discretion shall be exercised by the Surgeon General with respect to addicts discharged from hospitals of the Service.

#### VOLUNTARY PATIENTS

SEC. 344. (a) Any addict, whether or not he shall have been convicted of an offense against the United States, may apply to the Surgeon General for admission to a hospital of the Service especially equipped for the accommodation of addicts.

(b) Any applicant shall be examined by the Surgeon General who shall determine whether the applicant is an addict, whether by treatment in a hospital of the Service he may probably be cured of his addiction, and the estimated length of time necessary to effect his cure. The Surgeon General may, in his discretion, admit the applicant to a Service hospital. No such addict shall be admitted unless he agrees to submit to treatment for the maximum amount of time estimated by the Surgeon General to be necessary to effect a cure, and unless suitable accommodations are available after all eligible addicts convicted of offenses against the United States have been admitted. Any such addict may be required to pay for his subsistence, care, and treatment at rates fixed by the Surgeon General and amounts so paid shall be covered into the Treasury of the United States to the credit of the appropriation from which the expenditure for his subsistence, care, and treatment was made.

(c) Any addict admitted for treatment under this section, including any addict, not convicted of an offense, who voluntarily submits himself for treatment, may be confined in a hospital of the Service for a period not exceeding the maximum amount of time estimated by the Surgeon General as necessary to effect a cure of the addiction or until such time as he ceases to be an addict.

(d) Any addict admitted for treatment under this section shall not thereby forfeit or abridge any of his rights as a citizen of the United States; nor shall such admission or treatment be used against him in any proceeding in any court; and the record of his voluntary commitment shall be confidential and shall not be divulged.

#### PENALTIES

SEC. 345. (a) Any person not authorized by law or by the Surgeon General who introduces or attempts to introduce into or upon the grounds of any hospital of the Service at which addicts are treated and cared for, any habit-forming narcotic drug, weapon, or any other contraband article or thing, or any contraband letter or message intended to be received by an inmate thereof, shall be guilty of a felony and, upon conviction thereof, shall be punished by imprisonment for not more than ten years.

(b) It shall be unlawful for any person properly committed thereto to escape or attempt to escape from a hospital of the Service at which addicts are treated and cared for, and any such person upon apprehension and conviction in a United States court shall be punished by imprisonment for not more than five years, such sentence to begin upon the expiration of the sentence for which such person was originally confined.

(c) Any person who procures the escape of any person admitted to a hospital of the Service at which addicts are treated and cared for, or who advises, connives at, aids, or assists in such escape, or who conceals any such inmate after such escape, shall be punished upon conviction in a United States court by imprisonment in the penitentiary for not more than three years.

### PART F—BIOLOGICAL PRODUCTS

#### REGULATION OF BIOLOGICAL PRODUCTS

SEC. 351. (a) No person shall sell, barter, or exchange, or offer for sale, barter, or exchange in the District of Columbia, or send, carry, or bring for sale, barter, or exchange from any State or possession into any other State or possession or into any foreign country, or from any foreign country into any State or possession, any virus, therapeutic serum, toxin, antitoxin, or analogous product, or arsphenamine or its derivatives (or any other trivalent organic arsenic compound), applicable to the prevention, treatment, or cure of diseases or injuries of man, unless (1) such virus, serum, toxin, antitoxin, or other product has been propagated or manufactured and prepared at an establishment holding an unsuspended and unrevoked license issued by the Administrator as hereinafter authorized, to propagate or manufacture, and prepare such virus, serum, toxin, antitoxin, or other product for sale in the District of Columbia, or for sending, bringing, or carrying from place to place aforesaid; and (2) each

package of such virus, serum, toxin, antitoxin, or other product is plainly marked with the proper name of the article contained therein, the name, address, and license number of the manufacturer, and the date beyond which the contents cannot be expected beyond reasonable doubt to yield their specific results. The suspension or revocation of any license shall not prevent the sale, barter, or exchange of any virus, serum, toxin, antitoxin, or other product aforesaid which has been sold and delivered by the licensee prior to such suspension or revocation, unless the owner or custodian of such virus, serum, toxin, antitoxin, or other product aforesaid has been notified by the Administrator not to sell, barter, or exchange the same.

(b) No person shall falsely label or mark any package or container of any virus, serum, toxin, antitoxin, or other product aforesaid; nor alter any label or mark on any package or container of any virus, serum, toxin, antitoxin, or other product aforesaid so as to falsify such label or mark.

(c) Any officer, agent, or employee of the Federal Security Agency, authorized by the Administrator for the purpose, may during all reasonable hours enter and inspect any establishment for the propagation or manufacture and preparation of any virus, serum, toxin, antitoxin, or other product aforesaid for sale, barter, or exchange in the District of Columbia, or to be sent, carried, or brought from any State or possession into any other State or possession or into any foreign country, or from any foreign country into any State or possession.

(d) Licenses for the maintenance of establishments for the propagation or manufacture and preparation of products described in subsection (a) of this section may be issued only upon a showing that the establishment and the products for which a license is desired meet standards, designed to insure the continued safety, purity, and potency of such products, prescribed in regulations made jointly by the Surgeon General, the Surgeon General of the Army, and the Surgeon General of the Navy, and approved by the Administrator, and licenses for new products may be issued only upon a showing that they meet such standards. All such licenses shall be issued, suspended, and revoked as prescribed by regulations and all licenses issued for the maintenance of establishments for the propagation or manufacture and preparation, in any foreign country, of any such products for sale, barter, or exchange in any State or possession shall be issued upon condition that the licensees will permit the inspection of their establishments in accordance with subsection (c) of this section.

(e) No person shall interfere with any officer, agent, or employee of the Service in the performance of any duty imposed upon him by this section or by regulations made by authority thereof.

(f) Any person who shall violate, or aid or abet in violating, any of the provisions of this section shall be punished upon conviction by a fine not exceeding \$500 or by imprisonment not exceeding one year, or by both such fine and imprisonment, in the discretion of the court.

(g) Nothing contained in this Act shall be construed as in any way affecting, modifying, repealing, or superseding the provisions of the Federal Food, Drug, and Cosmetic Act (U. S. C., 1940 edition, title 21, ch. 9).



## PREPARATION OF BIOLOGICAL PRODUCTS

SEC. 352. (a) The Service may prepare for its own use any product described in section 351 and any product necessary to carrying out any of the purposes of section 301.

(b) The Service may prepare any product described in section 351 for the use of other Federal departments or agencies, and public or private agencies and individuals engaged in work in the field of medicine when such product is not available from establishments licensed under such section.

## PART G—QUARANTINE AND INSPECTION

## CONTROL OF COMMUNICABLE DISEASES

SEC. 361. (a) The Surgeon General, with the approval of the Administrator, is authorized to make and enforce such regulations as in his judgment are necessary to prevent the introduction, transmission, or spread of communicable diseases from foreign countries into the States or possessions, or from one State or possession into any other State or possession. For purposes of carrying out and enforcing such regulations, the Surgeon General may provide for such inspection, fumigation, disinfection, sanitation, pest extermination, destruction of animals or articles found to be so infected or contaminated as to be sources of dangerous infection to human beings, and other measures, as in his judgment may be necessary.

(b) Regulations prescribed under this section shall not provide for the apprehension, detention, or conditional release of individuals except for the purpose of preventing the introduction, transmission, or spread of such communicable diseases as may be specified from time to time in Executive orders of the President upon the recommendation of the National Advisory Health Council and the Surgeon General.

(c) Except as provided in subsection (d), regulations prescribed under this section, insofar as they provide for the apprehension, detention, examination, or conditional release of individuals, shall be applicable only to individuals coming into a State or possession from a foreign country, the Territory of Hawaii, or a possession.

(d) On recommendation of the National Advisory Health Council, regulations prescribed under this section may provide for the apprehension and examination of any individual reasonably believed to be infected with a communicable disease in a communicable stage and (1) to be moving or about to move from a State to another State; or (2) to be a probable source of infection to individuals who, while infected with such disease in a communicable stage, will be moving from a State to another State. Such regulations may provide that if upon examination any such individual is found to be infected, he may be detained for such time and in such manner as may be reasonably necessary.

## SUSPENSION OF ENTRIES AND IMPORTS FROM DESIGNATED PLACES

SEC. 362. Whenever the Surgeon General determines that by reason of the existence of any communicable disease in a foreign country

there is serious danger of the introduction of such disease into the United States, and that this danger is so increased by the introduction of persons or property from such country that a suspension of the right to introduce such persons and property is required in the interest of the public health, the Surgeon General, in accordance with regulations approved by the President, shall have the power to prohibit, in whole or in part, the introduction of persons and property from such countries or places as he shall designate in order to avert such danger, and for such period of time as he may deem necessary for such purpose.

#### SPECIAL POWERS IN TIME OF WAR

SEC. 363. To protect the military and naval forces and war workers of the United States, in time of war, against any communicable disease specified in Executive orders as provided in subsection (b) of section 361, the Surgeon General, on recommendation of the National Advisory Health Council, is authorized to provide by regulations for the apprehension and examination, in time of war, of any individual reasonably believed (1) to be infected with such disease in a communicable stage and (2) to be a probable source of infection to members of the armed forces of the United States or to individuals engaged in the production or transportation of arms, munitions, ships, food, clothing, or other supplies for the armed forces. Such regulations may provide that if upon examination any such individual is found to be so infected, he may be detained for such time and in such manner as may be reasonably necessary.

#### QUARANTINE STATIONS

SEC. 364. (a) Except as provided in title II of the Act of June 15, 1917, as amended (U. S. C., 1940 edition, title 50, secs. 191-194), the Surgeon General shall control, direct, and manage all United States quarantine stations, grounds, and anchorages, designate their boundaries, and designate the quarantine officers to be in charge thereof. With the approval of the President he shall from time to time select suitable sites for and establish such additional stations, grounds, and anchorages in the States and possessions of the United States as in his judgment are necessary to prevent the introduction of communicable diseases into the States and possessions of the United States.

(b) The Surgeon General shall establish the hours during which quarantine service shall be performed at each quarantine station, and, upon application by any interested party, may establish quarantine inspection during the twenty-four hours of the day, or any fraction thereof, at such quarantine stations as, in his opinion, require such extended service. He may restrict the performance of quarantine inspection to hours of daylight for such arriving vessels as cannot, in his opinion, be satisfactorily inspected during hours of darkness. No vessel shall be required to undergo quarantine inspection during the hours of darkness, unless the quarantine officer at such quarantine station shall deem an immediate inspection necessary to protect the public health. Uniformity shall not be required in the

hours during which quarantine inspection may be obtained at the various ports of the United States.

#### CERTAIN DUTIES OF CONSULAR AND OTHER OFFICERS

SEC. 365. (a) Any consular or medical officer of the United States, designated for such purpose by the Administrator, shall make reports to the Surgeon General, on such forms and at such intervals as the Surgeon General may prescribe, of the health conditions at the port or place at which such officer is stationed.

(b) It shall be the duty of the customs officers and of Coast Guard officers to aid in the enforcement of quarantine rules and regulations; but no additional compensation, except actual and necessary traveling expenses, shall be allowed any such officer by reason of such services.

#### BILLS OF HEALTH

SEC. 366. (a) Except as otherwise prescribed in regulations, any vessel at any foreign port or place clearing or departing for any port or place in a State or possession shall be required to obtain from the consular officer of the United States or from the Public Health Service officer, or other medical officer of the United States designated by the Surgeon General, at the port or place of departure, a bill of health in duplicate, in the form prescribed by the Surgeon General. The President, from time to time, shall specify the ports at which a medical officer shall be stationed for this purpose. Such bill of health shall set forth the sanitary history and condition of said vessel, and shall state that it has in all respects complied with the regulations prescribed pursuant to subsection (c). Before granting such duplicate bill of health, such consular or medical officer shall be satisfied that the matters and things therein stated are true. The consular officer shall be entitled to demand and receive the fees for bills of health and such fees shall be established by regulation.

(b) Original bills of health shall be delivered to the collectors of customs at the port of entry. Duplicate copies of such bills of health shall be delivered at the time of inspection to quarantine officers at such port. The bills of health herein prescribed shall be considered as part of the ship's papers, and when duly certified to by the proper consular or other officer of the United States, over his official signature and seal, shall be accepted as evidence of the statements therein contained in any court of the United States.

(c) The Surgeon General shall from time to time prescribe regulations, applicable to vessels referred to in subsection (a) of this section for the purpose of preventing the introduction into the States or possessions of the United States of any communicable disease by securing the best sanitary condition of such vessels, their cargoes, passengers, and crews. Such regulations shall be observed by such vessels prior to departure, during the course of the voyage, and also during inspection, disinfection, or other quarantine procedure upon arrival at any United States quarantine station.

(d) The provisions of subsections (a) and (b) of this section shall not apply to vessels plying between such foreign ports on or near the frontiers of the United States and ports of the United States as are designated by treaty.



(e) It shall be unlawful for any vessel to enter any port in any State or possession of the United States to discharge its cargo, or land its passengers, except upon a certificate of the quarantine officer that regulations prescribed under subsection (c) have in all respects been complied with by such officer, the vessel, and its master. The master of every such vessel shall deliver such certificate to the collector of customs at the port of entry, together with the original bill of health and other papers of the vessel. The certificate required by this subsection shall be procurable from the quarantine officer, upon arrival of the vessel at the quarantine station and satisfactory inspection thereof, at any time within which quarantine services are performed at such station.

#### CIVIL AIR NAVIGATION AND CIVIL AIRCRAFT

SEC. 367. The Surgeon General is authorized to provide by regulations for the application to air navigation and aircraft of any of the provisions of sections 364, 365, and 366 and regulations prescribed thereunder (including penalties and forfeitures for violations of such sections and regulations), to such extent and upon such conditions as he deems necessary for the safeguarding of the public health.

#### PENALTIES

SEC. 368. (a) Any person who violates any regulation prescribed under sections 361, 362, or 363, or any provision of section 366 or any regulation prescribed thereunder, or who enters or departs from the limits of any quarantine station, ground, or anchorage in disregard of quarantine rules and regulations or without permission of the quarantine officer in charge, shall be punished by a fine of not more than \$1,000 or by imprisonment for not more than one year, or both.

(b) Any vessel which violates section 366, or any regulations thereunder or under section 364, or which enters within or departs from the limits of any quarantine station, ground, or anchorage in disregard of the quarantine rules and regulations or without permission of the officer in charge, shall forfeit to the United States not more than \$5,000, the amount to be determined by the court, which shall be a lien on such vessel, to be recovered by proceedings in the proper district court of the United States. In all such proceedings the United States district attorney shall appear on behalf of the United States; and all such proceedings shall be conducted in accordance with the rules and laws governing cases of seizure of vessels for violation of the revenue laws of the United States.

(c) With the approval of the Administrator, the Surgeon General may, upon application therefor, remit or mitigate any forfeiture provided for under subsection (b) of this section, and he shall have authority to ascertain the facts upon all such applications.

#### ADMINISTRATION OF OATHS

SEC. 369. Medical officers of the United States, when performing duties as quarantine officers at any port or place within the United States, are authorized to take declarations and administer oaths in matters pertaining to the administration of the quarantine laws and regulations of the United States.

## TITLE IV—NATIONAL CANCER INSTITUTE

## TO BE A DIVISION IN NATIONAL INSTITUTE OF HEALTH

SEC. 401. The National Cancer Institute shall be a division in the National Institute of Health.

## CANCER RESEARCH, AND SO FORTH

SEC. 402. In carrying out the purposes of section 301 with respect to cancer the Surgeon General, through the National Cancer Institute and in cooperation with the National Cancer Advisory Council shall—

(a) conduct, assist, and foster researches, investigations, experiments, and studies relating to the cause, prevention, and methods of diagnosis and treatment of cancer;

(b) promote the coordination of researches conducted by the Institute and similar researches conducted by other agencies, organizations, and individuals;

(c) provide training and instruction in technical matters relating to the diagnosis and treatment of cancer;

(d) provide fellowships in the Institute from funds appropriated or donated for such purpose;

(e) secure for the Institute consultation services and advice of cancer experts from the United States and abroad;

(f) cooperate with State health agencies in the prevention, control, and eradication of cancer;

(g) procure, use, and lend radium as provided in section 403.

## ADMINISTRATION

SEC. 403. (a) In carrying out the provisions of section 402 all appropriate provisions of section 301 shall be applicable to the authority of the Surgeon General, and he is authorized—

(1) to purchase radium, from time to time, without regard to section 3709 of the Revised Statutes, to make such radium available for the purposes of this title, both to the Service and by loan to other agencies and institutions for such consideration and subject to such conditions as he may prescribe;

(2) to provide the necessary facilities where training and instruction may be given in all technical matters relating to diagnosis and treatment of cancer to persons found by the Surgeon General to have proper technical qualifications, and designated by him for such training or instruction, and to fix and pay them a per diem allowance during such training or instruction of not to exceed \$10.

(b) The Surgeon General shall recommend acceptance of conditional gifts pursuant to section 501 of this Act, for study, investigation, or research into the cause, prevention, and methods of diagnosis and treatment of cancer, or for the acquisition of grounds or for the erection, equipment, or maintenance of premises, buildings, or equipment of the Institute, only after consultation with the National Cancer Advisory Council. Donations of \$50,000 or over in aid of research under this title may be acknowledged by the establishment within the Institute of suitable memorials to the donors.

(c) In carrying out the purposes of section 402 grants-in-aid for cancer projects shall be made only after review and recommendation of the National Cancer Advisory Council made pursuant to section 404.

#### FUNCTIONS OF COUNCIL

SEC. 404. The council is authorized—

(a) to review research projects or programs submitted to or initiated by it relating to the study of the cause, prevention, or methods of diagnosis and treatment of cancer, and certify approval to the Surgeon General, for prosecution under section 402, of any such projects which it believes show promise of making valuable contributions to human knowledge with respect to the cause, prevention, or methods of diagnosis and treatment of cancer;

(b) to collect information as to studies which are being carried on in the United States or any other country as to the cause, prevention, and methods of diagnosis and treatment of cancer, by correspondence or by personal investigation of such studies, and with the approval of the Surgeon General make available such information through the appropriate publications for the benefit of health agencies and organizations (public or private), physicians, or any other scientists, and for the information of the general public;

(c) to review applications from any university, hospital, laboratory, or other institution whether public or private, or from individuals, for grants-in-aid for research projects relating to cancer, and certify to the Surgeon General its approval of grants-in-aid in the cases of such projects which show promise of making valuable contributions to human knowledge with respect to the cause, prevention, or methods of diagnosis or treatment of cancer;

(d) to recommend to the Surgeon General for acceptance conditional gifts pursuant to section 501 of this Act; and

(e) to make recommendations to the Surgeon General with respect to carrying out the provisions of this title.

#### APPROPRIATIONS

SEC. 405. Appropriations to carry out the purposes of this title shall be available for the acquisition of land or the erection of buildings only if so specified, but in the absence of express limitation therein may be expended in the District of Columbia for personal services, stenographic recording and translating services, by contract if deemed necessary, without regard to section 3709 of the Revised Statutes; traveling expenses (including the expenses of attendance at meetings when specifically authorized by the Surgeon General); rental, supplies and equipment, purchase and exchange of medical books, books of reference, directories, periodicals, newspapers, and press clippings; purchase, operation, and maintenance of motor-propelled passenger-carrying vehicles; printing and binding (in addition to that otherwise provided by law); and for all other necessary expenses in carrying out the provisions of this title.



## OTHER WORK WITH RESPECT TO CANCER

SEC. 406. This title shall not be construed as limiting (a) the functions or authority of the Surgeon General or the Public Health Service under any other title of this Act, or of any other officer or agency of the United States, relating to the study of the prevention, diagnosis, and treatment of cancer; or (b) the expenditure of money therefor.

## TITLE V—MISCELLANEOUS

## GIFTS

SEC. 501. (a) The Administrator is authorized to accept on behalf of the United States gifts made unconditionally by will or otherwise for the benefit of the Service or for the carrying out of any of its functions. Conditional gifts may be so accepted if recommended by the Surgeon General, and the principal of and income from any such conditional gift shall be held, invested, reinvested, and used in accordance with its conditions, but no gift shall be accepted which is conditioned upon any expenditure not to be met therefrom or from the income thereof unless such expenditure has been approved by Act of Congress.

(b) Any unconditional gift of money accepted pursuant to the authority granted in subsection (a) of this section, the net proceeds from the liquidation (pursuant to subsection (c) or subsection (d) of this section) of any other property so accepted, and the proceeds of insurance on any such gift property not used for its restoration, shall be deposited in the Treasury of the United States and are hereby appropriated and shall be held in trust by the Secretary of the Treasury for the benefit of the Service, and he may invest and reinvest such funds in interest-bearing obligations of the United States or in obligations guaranteed as to both principal and interest by the United States. Such gifts and the income from such investments shall be available for expenditure in the operation of the Service and the performance of its functions, subject to the same examination and audit as is provided for appropriations made for the Service by Congress.

(c) The evidences of any unconditional gift of intangible personal property, other than money, accepted pursuant to the authority granted in subsection (a) of this section shall be deposited with the Secretary of the Treasury and he, in his discretion, may hold them, or liquidate them except that they shall be liquidated upon the request of the Administrator, whenever necessary to meet payments required in the operation of the Service or the performance of its functions. The proceeds and income from any such property held by the Secretary of the Treasury shall be available for expenditure as is provided in subsection (b) of this section.

(d) The Administrator shall hold any real property or any tangible personal property accepted unconditionally pursuant to the authority granted in subsection (a) of this section and he shall permit such property to be used for the operation of the Service and the performance of its functions or he may lease or hire such property, and may insure such property, and deposit the income thereof with the Secretary of the Treasury to be available for expend-

iture as provided in subsection (b) of this section: *Provided*, That the income from any such real property or tangible personal property shall be available for expenditure in the discretion of the Administrator for the maintenance, preservation, or repair and insurance of such property and that any proceeds from insurance may be used to restore the property insured. Any such property when not required for the operation of the Service or the performance of its functions may be liquidated by the Administrator, and the proceeds thereof deposited with the Secretary of the Treasury, whenever in his judgment the purposes of the gifts will be served thereby.

(e) Donations of \$50,000 or over in aid of research may be acknowledged by the establishment within the National Institute of Health of suitable memorials to the donors.

#### USE OF IMMIGRATION STATION HOSPITALS

SEC. 502. The Immigration and Naturalization Service may, by agreement of the heads of the departments concerned, permit the Public Health Service to use hospitals at immigration stations for the care of Public Health Service patients. The Surgeon General shall reimburse the Immigration and Naturalization Service for the actual cost of furnishing fuel, light, water, telephone, and similar supplies and services, which reimbursement shall be covered into the proper Immigration and Naturalization Service appropriation, or such costs may be paid from working funds established as provided by law, but no charge shall be made for the expense of physical upkeep of the hospitals. The Immigration and Naturalization Service shall reimburse the Surgeon General for the care and treatment of persons detained in hospitals of the Public Health Service at the request of the Immigration and Naturalization Service unless such persons are entitled to care and treatment under section 322 (a).

#### MONEY COLLECTED FOR CARE OF PATIENTS

SEC. 503. Money collected as provided by law for expenses incurred in the care and treatment of foreign seamen, and money received for the care and treatment of pay patients, including any amounts received from any executive department on account of care and treatment of pay patients, shall be covered into the appropriation from which the expenses of such care and treatment were paid.

#### CARE OF PUBLIC HEALTH SERVICE PATIENTS AT SAINT ELIZABETHS HOSPITAL

SEC. 504. Insane patients entitled to treatment by the Service shall be admitted, upon order of the Administrator, into Saint Elizabeths Hospital or, upon order of the Surgeon General, into any hospital, institution, or station of the Service especially equipped for the accommodation of such patients and shall be cared for and treated therein until cured or until ordered removed by the officer authorizing such admittance.

#### SETTLEMENT OF CLAIMS

SEC. 505. The Administrator may consider, ascertain, adjust, and determine any claim which shall accrue, on account of damages

occasioned by collisions or incident to the operation of vessels of the Service, and for which damages such vessels are found by him to be responsible. To be considered for settlement under this section, claims must be presented to the Administrator within one year of their accrual. The amount ascertained and determined to be due any claimant, not exceeding \$3,000 in any one case, shall be certified to Congress as a legal claim for payment out of appropriations that may be made therefor by Congress, together with a brief statement of the character of each claim, the amount claimed, and the amount allowed. Acceptance by any claimant of the amount determined to be due under this section shall be deemed to be in full and final settlement of such claim against the Government of the United States.

#### TRANSPORTATION OF REMAINS OF OFFICERS

SEC. 506. Appropriations available for traveling expenses of the Service shall be available for meeting the cost of preparation for burial and of transportation to the place of burial of remains of commissioned officers, and of personnel specified in regulations, who die in line of duty.

#### SETTLEMENT OF ACCOUNTS OF DECEASED OFFICERS

SEC. 507. (a) In the settlement of the accounts of deceased commissioned officers where the amount due the decedent's estate is less than \$1,000 and no demand is presented by a duly appointed representative of the estate, the accounting officers may allow the amount found due to the decedent's widow or legal heirs in the following order of precedence: First, to the widow; second, if the decedent left no widow, or the widow be dead at time of settlement, then to the children or their issue, per stirpes; third, if no widow or children or their issue, then to the father and mother in equal parts, provided the father has not abandoned the support of his family, in which case to the mother alone; fourth, if either the father or mother be dead, then to the one surviving; fifth, if there be no widow, child, father, or mother at the date of settlement, then to the brothers and sisters and children of deceased brothers and sisters, per stirpes.

(b) Subsection (a) shall not be construed so as to prevent payment of funeral expenses from the amount due the decedent's estate if a claim therefor is presented, before settlement by the accounting officers, by the person or persons who actually paid such expenses.

#### TRANSFER OF FUNDS

SEC. 508. For the purpose of any reorganization under section 202, the Administrator, with the approval of the Director of the Bureau of the Budget, is authorized to make such transfers of funds between appropriations as may be necessary for the continuance of transferred functions.

#### AVAILABILITY OF APPROPRIATIONS

SEC. 509. Appropriations for carrying out the provisions of section 301 shall be available for expenditure for personal services and rent at the seat of Government, for books of reference, periodicals, and exhibits, and for printing and binding.



## UNAUTHORIZED WEARING OF UNIFORMS

SEC. 510. Except as may be authorized by regulations of the President, the insignia and uniform of commissioned officers of the Service, or any distinctive part of such insignia or uniform, or any insignia or uniform any part of which is similar to a distinctive part thereof, shall not be worn, after the promulgation of such regulations, by any person other than a commissioned officer of the Service, and any person violating this section shall be subject to the penalties provided by the Act of June 3, 1916, as amended (U. S. C., 1940 edition, title 10, sec. 1393), in the case of unlawful wearing of the uniform of commissioned officers of the Army.

## ANNUAL REPORT

SEC. 511. The Surgeon General shall transmit to the Administrator, for submission to the Congress at the beginning of each regular session, a full report of the administration of the functions of the Service under this Act, including a detailed statement of receipts and disbursements.

TITLE VI—TEMPORARY AND EMERGENCY PROVISIONS  
AND AMENDMENTS AND REPEALS

## EXISTING POSITIONS, PROCEDURES, AND SO FORTH

SEC. 601. (a) The provisions of this Act shall not affect the term or tenure of office or employment of the Surgeon General, or of any officer or employee of the Service, or of any member of the National Advisory Health Council or the National Advisory Cancer Council, in office or employed at the time of its enactment.

(b) Notwithstanding the provisions of this Act, existing positions, divisions, committees, and procedures in the Service shall continue unless and until abolished, changed, or transferred pursuant to authority granted in this Act.

## EXISTING REGULATIONS, AND SO FORTH

SEC. 602. Notwithstanding the provisions of this Act, existing rules, regulations of or applicable to the Service, and Executive orders, shall remain in effect until repealed, or until modified or superseded by regulations made in accordance with the provisions of this Act.

## FUNDS, APPROPRIATIONS, AND PROPERTY

SEC. 603. All appropriations, allocations, and other funds, and all properties available for use by the Public Health Service or any division or unit thereof shall continue to be available to the Service.

## APPROPRIATIONS FOR EMERGENCY HEALTH AND SANITATION ACTIVITIES

SEC. 604. For each fiscal year during the continuance of the present war and during any period of demobilization after the war, there is hereby authorized to be appropriated such sum as may be necessary to enable the Surgeon General, either directly or through State health authorities, to conduct health and sanitation activities in areas adjoin-

ing military or naval reservations within or without the United States, in areas where there are concentrations of military or naval forces, in Government and private industrial plants engaged in defense work, and in areas adjoining such industrial plants.

#### EMPLOYEES' COMPENSATION

SEC. 605. (a) Section 7 of the Act of September 7, 1916, entitled "An Act to provide compensation for employees of the United States suffering injuries while in the performance of their duties, and for other purposes", as amended (U. S. C., 1940 edition, title 5, sec. 757), is amended by changing the period at the end thereof to a colon and adding the following: "*Provided*, That whenever any person is entitled to receive any benefits under this Act by reason of his injury, or by reason of the death of an employee, as defined in section 40, and is also entitled to receive from the United States any payments or benefits (other than the proceeds of any insurance policy), by reason of such injury or death under any other Act of Congress, because of service by him (or in the case of death, by the deceased) as an employee, as so defined, such person shall elect which benefits he shall receive. Such election shall be made within one year after the injury or death, or such further time as the Commission may for good cause allow, and when made shall be irrevocable unless otherwise provided by law."

(b) The definition of the term "employee" in section 40 of such Act of September 7, 1916, as amended (U. S. C., 1940 edition, title 5, sec. 790), is amended to read as follows:

"The term 'employee' includes all civil employees of the United States and of the Panama Railroad Company, commissioned officers of the Regular Corps of the Public Health Service, officers in the Reserve of the Public Health Service on active duty; and all persons, other than independent contractors and their employees, employed on the Menominee Indian Reservation in the State of Wisconsin, subsequent to September 7, 1916, in operations conducted pursuant to the Act entitled 'An Act to authorize the cutting of timber, the manufacture and sale of lumber, and the preservation of the forests on the Menominee Indian Reservation in the State of Wisconsin,' approved March 28, 1908, as amended, or any other Act relating to tribal timber and logging operations on the Menominee Reservation."

(c) In the case of injury or death of a commissioned officer of the Service occurring after November 10, 1943, and on or before the date of the termination of the present war, the election required by section 7 of such Act of September 7, 1916, as amended (U. S. C., 1940 edition, title 5, sec. 757), may be made, and the notice required by section 15 thereof and the written claim required by section 18 thereof may be filed, within such time as may be provided by regulations of the United States Employees' Compensation Commission, but not later than the expiration of one year following the termination of the present war. Prior to the expiration of such year any such election may be revised, and such revision shall operate retroactively to the date of death or injury, but there shall be deducted from the compensation or other benefit payable pursuant to a revised election any sum (except the proceeds of any insurance policy) theretofore paid on account of such death or injury.

(d) In the case of death of a commissioned officer of the Service which occurred after December 7, 1941, and prior to November 11, 1943, the rights provided to surviving beneficiaries by section 10 of the Public Health Service Act of 1943 shall continue notwithstanding the repeal of that Act. Such beneficiaries, in addition to the right to receive six months' pay, shall have the same right of election and of revising elections as is provided by subsection (c) of this section, except that in case of a revised election no deduction shall be made on account of such six months' pay.

#### COMPUTATION OF RETIRED PAY IN CERTAIN CASES

SEC. 606. In the case of commissioned officers of the Service appointed prior to the enactment of this Act, there shall be included, in determining retired pay pursuant to section 211 (c) (1), non-commissioned service in the Public Health Service, as well as all commissioned service.

#### ALLOWANCES FOR UNIFORMS TO CERTAIN COMMISSIONED PERSONNEL

SEC. 607. Each commissioned officer of the Service who was appointed to the Regular Corps or called to active duty in the Reserve Corps since December 7, 1941, and prior to the enactment of this Act, and who on or after November 11, 1943, was on active duty in the grade of junior assistant, assistant, or passed assistant and was receiving the pay of the first, second, or third pay period, shall be entitled to receive an allowance of \$250 for uniforms and equipment.

#### PATIENTS OF SAINT ELIZABETHS HOSPITAL IN PUBLIC HEALTH SERVICE HOSPITALS

SEC. 608. Insane patients entitled to treatment in Saint Elizabeths Hospital who may heretofore or hereafter, during the continuance of the present war, or during the period of six months thereafter, have been admitted to hospitals of the Service, may continue to be cared for and treated in such hospitals notwithstanding the termination of such period.

#### ELIGIBILITY OF OSTEOPATHS TO APPOINTMENT IN THE RESERVE CORPS

SEC. 609. For the duration of the present war and for six months thereafter graduates of reputable osteopathic colleges shall be eligible for appointment as reserve officers in the Service.

#### TEMPORARY PROVISIONS RESPECTING MEDICAL AND HOSPITAL BENEFITS

SEC. 610. (a) Subject to regulations of the President, members of the Women's Reserve of the Coast Guard, or their dependents, shall be entitled to the benefits provided by section 326 for male officers and enlisted men of the Coast Guard or their dependents: *Provided*, That the husbands of such members shall not be considered dependents, and the children of such members shall not be considered dependents unless their father is dead or they are in fact dependent on their mother for their chief support.

(b) Subject to regulations of the President, lightkeepers, assistant lightkeepers, and officers and crews of vessels of the former Light-



house Service, including any such persons who subsequent to June 30, 1939, have involuntarily been assigned to other civilian duty in the Coast Guard, who were entitled to medical relief at hospitals and other stations of the Public Health Service prior to enactment of this Act, and who are now or hereafter on active duty or who have been or may hereafter be retired under the provisions of section 6 of the Act of June 20, 1918, as amended (U. S. C., 1940 edition, title 33, sec. 763), shall be entitled to medical, surgical, and dental treatment and hospitalization at hospitals and other stations of the Public Health Service: *Provided*, That such persons while on active duty shall also be entitled to care and treatment in accordance with the provisions of section 322 (e) of this Act.

(c) For the duration of the present war and for six months thereafter, seamen employed on foreign-flag vessels which are owned or operated by citizens of the United States or by corporations incorporated under the law of the United States or of any State shall be entitled to the same benefits as are provided by section 322 (a) (1) for seamen employed on vessels of the United States.

#### REPEAL OF EXISTING LAW

SEC. 611. The following statutes or parts of statutes are hereby repealed:

The two paragraphs under the subheading "Marine—hospital establishment (customs:)" under the heading "Under the Treasury Department" in section 3689 in title XLI of the Revised Statutes of the United States;

Sections 4801, 4802, 4803, 4804, 4805, and 4806 in title LIX of the Revised Statutes of the United States;

The last paragraph under the heading "Miscellaneous" in chapter 130, 18 Statutes at Large 371, which paragraph is the seventh beginning on page 377;

Chapter 156, 18 Statutes at Large 485;

Chapter 66, 20 Statutes at Large 37;

Chapter 202, 20 Statutes at Large 484;

Chapter 61, 21 Statutes at Large 46;

Section 1, and the final clause of section 2 (which reads as follows: "and the said quarantine stations when so established shall be conducted by the Marine Hospital Service under regulations framed in accordance with the Act of April twenty-ninth, eighteen hundred and seventy-eight"), of chapter 727, 25 Statutes at Large 355;

Chapter 19, 25 Statutes at Large 639;

Chapter 51, 26 Statutes at Large 31;

The last sentence of the paragraph headed "Office of the Supervising Surgeon General, Marine Hospital Service" in chapter 541, 26 Statutes at Large 908, which appears at page 923 and reads as follows: "And hereafter, the Supervising Surgeon General is hereby authorized to cause the detail of two surgeons and two passed assistant surgeons for duty in the Bureau, who shall each receive the pay and allowances of their respective grades in the general service.";

Chapter 114, 27 Statutes at Large 449;

The last sentence of the paragraph headed "Office of Supervising Surgeon General, Marine Hospital Service", in chapter 174, 28 Statutes at Large 162, which appears at page 179 and which reads as

follows: "And hereafter the Supervising Surgeon General of the Marine Hospital Service is hereby authorized to cause the detail of an additional medical officer and one hospital steward for duty in the Bureau, who shall each receive the pay and allowances of his respective grade in the general service.";

Chapter 213, 28 Statutes at Large 229;

Chapter 300, 28 Statutes at Large 372;

The last sentence of the paragraph headed "Office of Supervising Surgeon General, Marine Hospital Service", in chapter 177, 28 Statutes at Large 764, which appears at page 780 and which reads as follows: "And hereafter the Supervising Surgeon General of the Marine Hospital Service is hereby authorized to cause the detail of two hospital attendants from the port of New York for duty in the laboratory of the Bureau, and who shall each receive the pay equivalent to the compensation of a first-class hospital attendant.";

The proviso at the end of the paragraph headed "Office of Supervising Surgeon-General Marine-Hospital Service" in chapter 265, 29 Statutes at Large 538, which appears at page 554 and which reads as follows: "*Provided*, That the Secretary of the Treasury is hereby authorized, in his discretion, to grant to the medical officers of the Marine-Hospital Service commissioned by the President, without deduction of pay, leaves of absence for the same period of time and in the same manner as is now authorized to be granted to officers of the Army by the Secretary of War";

Chapter 349, 30 Statutes at Large 976;

Section 10, chapter 191, 31 Statutes at Large 77, at page 80;

The first paragraph of section 97 of chapter 339, 31 Statutes at Large 141;

Chapter 836, 31 Statutes at Large 1086;

That portion of the third paragraph of section 84 of chapter 1369, 32 Statutes at Large 691, which appears at page 711 and which reads as follows: "and the provisions of law relating to the public health and quarantine shall apply in the case of all vessels entering a port of the United States or its aforesaid possessions from said islands, where the customs officers at the port of departure shall perform the duties required by such law of consular officers in foreign ports";

Chapter 1370, 32 Statutes at Large 712;

Chapter 1378, 32 Statutes at Large 728;

Chapter 1443, 33 Statutes at Large 1009;

The last sentence of the last paragraph under the heading "Public Health and Marine Hospital Service" in chapter 1484, 33 Statutes at Large 1214, which appears at page 1217 and which reads as follows: "And the Secretary of the Treasury shall, for the fiscal year nineteen hundred and seven, and annually thereafter, submit to Congress, in the regular Book of Estimates, detailed estimates of the expenses of maintaining the Public Health and Marine Hospital Service,";

Public Resolution Numbered 21, 33 Statutes at Large 1283;

Chapter 3433, 34 Statutes at Large 299;

Section 17 of chapter 1134, 34 Statutes at Large 898, at page 903;

That portion of the third paragraph under the heading "Back Pay and Bounty" in chapter 200, 35 Statutes at Large 373, as amended by chapter 213, 52 Statutes at Large 352, which is at page 352 of 52

Statutes at Large and which reads as follows: "and of deceased commissioned officers of the Public Health Service";

The proviso in the tenth paragraph under the heading "Public Health and Marine Hospital Service" in chapter 285, 36 Statutes at Large 1363, which appears in the eighth paragraph on page 1394 and which reads as follows: "*Provided*, That there may be admitted into said hospitals, for study, persons with infectious or other diseases affecting the public health, and not to exceed ten cases in any one hospital at one time", and the substantially similar provisions appearing under the heading "Public Health and Marine Hospital Service" or the heading "Public Health Service" in the following statutes: Chapter 355, 37 Statutes at Large 417, at page 435; chapter 3, 38 Statutes at Large 4, at page 24; chapter 209, 39 Statutes at Large 262, at page 278; chapter 28, 40 Statutes at Large 459, at page 468; chapter 113, 40 Statutes at Large 634, at page 644; chapter 24, 41 Statutes at Large 163, at page 175;

Chapter 288, 37 Statutes at Large 309;

The proviso at the end of the last paragraph under the heading "Public Health Service" in chapter 149, 37 Statutes at Large 912, which appears at page 915 and which reads as follows: "*Provided*, That hereafter the director of the Hygienic Laboratory shall receive the pay and allowances of a senior surgeon";

That portion of the second paragraph under the heading "Public Health Service" in chapter 3, 38 Statutes at Large 4, which appears at page 23 and which reads as follows: "at least six of the assistant surgeons provided for hereunder shall be required to have had a special training in the diagnosis of insanity and mental defect for duty in connection with the examination of arriving aliens with special reference to the detection of mental defection";

The proviso at the end of the twelfth paragraph under the heading "Public Health Service" in chapter 3, 38 Statutes at Large 4, which appears at page 24 and which reads as follows: "*Provided*, That hereafter commissioned officers and pharmacists, and those employees of the Service devoting all their time to field work, shall be entitled to hospital relief when taken sick or injured in line of duty";

The last clause of chapter 124, 38 Statutes at Large 387, which reads as follows: "and the said Secretary is hereby authorized to detail for duty on revenue cutters such surgeons and other persons of the Public Health Service as he may deem necessary";

Section 5 of chapter 414, 39 Statutes at Large 536, at page 538;

Chapter 26, 39 Statutes at Large 872;

That portion of section 16 of chapter 29, 39 Statutes at Large 874, which appears at page 885 and which reads as follows: "who shall have had at least two years' experience in the practice of their profession since receiving the degree of doctor of medicine, and";

The sixth paragraph under the heading "Public Health Service" in chapter 3, 40 Statutes at Large 2, at page 6;

The seventh paragraph under the heading "Bureau of Mines" in chapter 27, 40 Statutes at Large 105, which is the third full paragraph appearing on page 146;

Chapter 37, 40 Statutes at Large 242;



The proviso in the fourth paragraph under the heading "Public Health Service" in chapter 113, 40 Statutes at Large 634, which appears at page 644 and which reads as follows: "*Provided*, That the pay of attendants at marine hospitals, quarantine and immigration stations, whose present compensation is less than the rate of \$1,200 per annum, may be increased to a rate not to exceed \$1,200 per annum";

The proviso in the eleventh paragraph under the heading "Public Health Service" in chapter 113, 40 Statutes at Large 634, which appears at page 644 and which reads as follows: "*Provided*, That the Public Health Service, from and after July first, nineteen hundred and eighteen, shall pay to Saint Elizabeths Hospital the actual per capita cost of maintenance in the said hospital of patients committed by that Service";

The sixtieth paragraph under the heading "Bureau of Fisheries" in chapter 113, 40 Statutes at Large 634, which is the fourth full paragraph appearing on page 694;

Sections 1, 3, 4, 6, and 7 of chapter XV of chapter 143, 40 Statutes at Large 845, at page 886;

The thirteenth paragraph under the heading "General Expenses, Bureau of Chemistry" in chapter 178, 40 Statutes at Large 973, which is the second full paragraph appearing on page 992;

Section 2 of chapter 179, 40 Statutes at Large 1008;

Chapter 196, 40 Statutes at Large 1017;

Chapter 98, 40 Statutes at Large 1302;

The last paragraph under the heading "Public Health Service" in chapter 6, 41 Statutes at Large 35, which is the sixth full paragraph appearing on page 45;

The proviso at the end of the first paragraph under the heading "Public Health Service" in chapter 94, 41 Statutes at Large 503, which appears at page 507, and which reads as follows: "*Provided*, That the Secretary of the Treasury is authorized to make regulations governing the disposal of articles produced by patients in the course of their curative treatment, either by allowing the patient to retain same or by selling the articles and depositing the money received to the credit of the appropriation from which the materials for making the articles were purchased";

The second paragraph under the heading "Public Health Service" in chapter 94, 41 Statutes at Large 503, which is the seventh full paragraph appearing on page 507;

The last paragraph under the heading "Public Health Service" in chapter 94, 41 Statutes at Large 503, which is the seventh full paragraph appearing on page 508, and the substantially similar provisions in chapter 161, 41 Statutes at Large 1367, at page 1378;

The fourth paragraph under the heading "Quarantine Stations" in chapter 235, 41 Statutes at Large 874, which is the eighth full paragraph appearing on page 875;

The third paragraph under the heading "Public Health Service" in chapter 235, 41 Statutes at Large 874, which is the ninth full paragraph appearing on page 883;

Chapter 80, 41 Statutes at Large 1149;

The second paragraph under the heading "Public Health Service" in chapter 23, 42 Statutes at Large 29, which is the thirteenth full paragraph appearing on page 38;

The proviso at the end of section 4 of chapter 57, 42 Statutes at Large 147, which appears at page 148, and which reads as follows: "*Provided*, That all commissioned personnel detailed or hereafter detailed from the United States Public Health Service to the Veterans' Bureau, shall hold the same rank and grade, shall receive the same pay and allowances, and shall be subject to the same rules for relative rank and promotion as now or hereafter may be provided by law for commissioned personnel of the same rank or grade or performing the same or similar duties in the United States Public Health Service";

The ninth paragraph under the heading "Bureau of Mines", in chapter 199, 42 Statutes at Large 552, which is the fourth full paragraph on page 588, and the substantially similar provisions in chapter 42, 42 Statutes at Large 1174, at page 1210; chapter 264, 43 Statutes at Large 390, at page 422; chapter 462, 43 Statutes at Large 1141, at page 1175;

The last sentence of the paragraph under the heading "Public Health Service" in chapter 258, 42 Statutes at Large 767, which appears at page 776 and which reads as follows: "The Immigration Service shall reimburse the Public Health Service on the basis of per capita rates fixed by the Secretary of the Treasury and the sums received by the Public Health Service from this source shall be covered into the Treasury as miscellaneous receipts";

The first proviso at the end of the ninth paragraph under the heading "Public Health Service" in chapter 84, 43 Statutes at Large 64, which appears at page 75 and which reads as follows: "*Provided*, That the Immigration Service shall permit the Public Health Service to use the hospitals at Ellis Island Immigration Station for the care of the Public Health Service patients, free of expense for physical upkeep, but with a charge of actual cost for fuel, light, water, telephone, and similar supplies and services, to be covered into the proper Immigration Service appropriations; and moneys collected by the Immigration Service on account of hospital expenses of persons detained under the immigration laws and regulations at Ellis Island Immigration Station shall be covered into the Treasury as miscellaneous receipts:";

and substantially similar provisions under the heading "Public Health Service" in chapter 87, 43 Statutes at Large 763, at page 775; chapter 43, 44 Statutes at Large 136, at page 147; chapter 126, 45 Statutes at Large 162, at page 174; chapter 39, 45 Statutes at Large 1028, at page 1039; chapter 289, 46 Statutes at Large 335, at page 347; chapter 110, 49 Statutes at Large 218, at page 229; chapter 725, 49 Statutes at Large 1827, at page 1839; chapter 180, 50 Statutes at Large 137, at page 149; chapter 55, 52 Statutes at Large 120, at page 133; chapter 428, 54 Statutes at Large 574, at page 585; chapter 269, 55 Statutes at Large 466, at page 481; and chapter 475, 56 Statutes at Large 562, at page 581;

Chapter 146, 43 Statutes at Large 809;

The words "and public health" in the last sentence of section 7 (b) of chapter 344, 44 Statutes at Large 568, at page 572;

The words "or public-health" in section 11 (b) (2) of chapter 344, 44 Statutes at Large 568, at page 574, as amended;

Section 3 of chapter 371, 44 Statutes at Large 622, at page 626;

Chapter 625, 45 Statutes at Large 603;

The proviso at the end of the fifth paragraph under the heading "Public Health Service" in chapter 39, 45 Statutes at Large 1028, which appears at page 1039, and which reads as follows: "*Provided*, That funds expendable for transportation and traveling expenses may also be used for preparation for shipment and transportation to their former homes of remains of officers who die in line of duty", and substantially similar provisions appearing under the heading "Public Health Service" in chapter 289, 46 Statutes at Large 335, at page 346; chapter 110, 49 Statutes at Large 218, at page 228; chapter 725, 49 Statutes at Large 1827, at page 1839; chapter 180, 50 Statutes at Large 137, at page 148; chapter 55, 52 Statutes at Large 120, at page 132; chapter 428, 54 Statutes at Large 574, at page 584; chapter 269, 55 Statutes at Large 466, at page 480;

Chapter 82, 45 Statutes at Large 1085;

The second paragraph under the heading "Government in the Territories" in chapter 707, 45 Statutes at Large 1623, which is the seventh full paragraph on page 1644;

So much of chapter 70, 46 Statutes at Large 81, as reads: ", and at his discretion to permit the erection of other buildings which may in the future be donated to promote the welfare of patients and personnel";

Chapter 125, 46 Statutes at Large 150;

Chapter 320, 46 Statutes at Large 379;

Section 4 of chapter 488, 46 Statutes at Large 585;

Chapter 597, 46 Statutes at Large 807;

Chapter 409, 46 Statutes at Large 1491;

The words "or public health" in the last sentence of section 2 of chapter 656, 48 Statutes at Large 1116;

The ninth paragraph under the heading "Public Health Service" in chapter 110, 49 Statutes at Large 218, which is the second full paragraph appearing on page 229;

Title VI of chapter 531, 49 Statutes at Large 620, at page 634;

Chapter 161, 49 Statutes at Large 1185;

That portion of chapter 550, 49 Statutes at Large 1514, which reads as follows: "or of the United States Public Health Service";

The proviso at the end of the thirteenth paragraph under the heading "Public Health Service" in chapter 725, 49 Statutes at Large 1827, which appears at page 1840 and which reads as follows: "*Provided*, That on and after July 1, 1936, the Narcotic Farm at Lexington, Kentucky, shall be known as United States Public Health Service Hospital, Lexington, Kentucky, but such change in designation shall not affect the status of any person in connection therewith or the status of such institution under any Act applicable thereto";

The fourth paragraph under the heading "Public Health Service" in chapter 180, 50 Statutes at Large 137, which is the sixth full paragraph on page 148;

Section 2 of chapter 545, 50 Statutes at Large 547, at page 548;

Chapter 565, 50 Statutes at Large 559;



The first proviso in the paragraph having the subhead "Division of Mental Hygiene" under the heading "Public Health Service" in chapter 55, 52 Statutes at Large 120, which appears at page 134 and which reads as follows: "*Provided*, That on and after July 1, 1938, the United States Narcotic Farm, Fort Worth, Texas, shall be known as United States Public Health Service Hospital of Fort Worth, Texas, but such change in designation shall not affect the status of any person in connection therewith or the status of such institution under any Act applicable thereto:";

Chapter 267, 52 Statutes at Large 439;

Chapter 92, 53 Statutes at Large 620;

Chapter 606, 53 Statutes at Large 1266;

Chapter 636, 53 Statutes at Large 1338;

Section 509 of chapter 666, 53 Statutes at Large 1360, at page 1381;

Section 205 (b) of Reorganization Plan Numbered I, 53 Statutes at Large 1423, at page 1425;

Chapter 566, 54 Statutes at Large 747;

The fourth paragraph under the heading "Public Health Service" in Public Law 11, Seventy-eighth Congress; and

Public Law 184, Seventy-eighth Congress.

#### PRESERVATION OF RIGHTS AND LIABILITIES

SEC. 612. The repeal of the several statutes or parts of statutes accomplished by section 611 shall not affect any act done, or any right accruing or accrued, or any suit or proceeding had or commenced in any civil cause, before such repeal, but all rights and liabilities under the statutes or parts thereof so repealed shall continue, and may be enforced in the same manner, as if such repeal had not been made.

Approved July 1, 1944.



